



INDIVIDUAL EVENTS
BRC Youth Summer Series Contestant Entry Form
Po Box 505 Bandera, Tx 78003

Event Date: _____
Contestant Name: _____ Ph: _____
Address: _____

Contestant DOB (mm/dd/yy) ____/____/____

| | |
|--|-----------------|
| | Age Group 8-11 |
| | Age Group 12-14 |
| | Age Group 15-18 |

| Events | | |
|--------------|------|---------------|
| | \$30 | Cloverleaf |
| | \$30 | Straights |
| | \$30 | Poles |
| | \$35 | Goat Tying |
| | \$35 | Breakaway |
| | \$35 | Tie Down |
| | \$15 | Office Charge |
| \$_____Total | | |

Liability Release Waiver:

(All participants must be complete w/parent or guardian signature for minors)

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE & REMEDIES CODE) A FARM ANIMAL & EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN THE FARM ANIMAL & EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL & EQUINE ACTIVITIES.

I agree that in no event will I hold Bandera Rodeo Club, their directors or agents, Mansfield Park, or the county of Bandera, Texas liable for any injury that may be suffered. I am aware of inherent risk of the event I am participating in. I consent to all activities that I will be participating in. I affirm that I am medically mentally, and physically capable of participation in said activities.

Date: _____
Parent Printed Name: _____
Parent Signature _____

(please fill out reverse side too)

Liability Waiver

BRC Youth Summer Series May 5th, June 9th, June 30th, July 14th, & August 11th 2018

Participant Name: _____ DOB: _____ Age: as of 05/01/18: _____

Parent Name: _____ Date of application: _____

Email address: _____

Phone Number: _____ ALT Phone Number: _____

Mailing Address(USPS): _____

City: _____ State: _____ Zip Code: _____

Bandera Rodeo Club Liability Release Waiver:

(All participants must be complete W/parent or guardian signature for minors)

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE & REMEDIES CODE) A FARM ANIMAL PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN THE FARM ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL ACTIVITIES.

I consent to my child's participation of rodeo events . I agree that in no event will I hold Bandera Rodeo Club, their directors or agents, Mansfield Park, or the county of Bandera, Texas liable for any injury that may be suffered. I am aware of inherent risk and potential danger of the event my child is participating in. I consent to all activities of each event for which my child participates. I affirm that my child is medically mentally, and physically capable of participation in said activities.

Notice:

All horses participating in this summer's activities must have a Negative Coggins test on file.

Coggins:

Owner: _____ Horse's Name: _____

Accession #: _____ Date: _____ Lab: _____

Coggins:

Owner: _____ Horse's Name: _____

Accession #: _____ Date: _____ Lab: _____

Coggins:

Owner: _____ Horse's Name: _____

Accession #: _____ Date: _____ Lab: _____

Date: _____ Guardian Printed Name: _____

Guardian Signature: _____