



Kansas Junior Rodeo Association 2010 Membership Form

Single Membership \$50 Family Membership \$80 Amount Paid: _____

Child 1: _____ Age as of Sept. 1 _____ Date of Birth _____ Shirt/Jacket Size _____

Child 2: _____ Age as of Sept. 1 _____ Date of Birth _____ Shirt/Jacket Size _____

Child 3: _____ Age as of Sept. 1 _____ Date of Birth _____ Shirt/Jacket Size _____

Child 4: _____ Age as of Sept. 1 _____ Date of Birth _____ Shirt/Jacket Size _____

Address: _____ City _____ State _____ Zip Code _____

Phone Number: _____ Email Address: _____

Copy of Birth certificate must be on file with Membership secretary before the finals rodeo.

As a consideration for being allowed to attend and/or compete in the KJRA events, I the undersigned agree to the following:

Acknowledgment of Risk: The undersigned acknowledges that the KJRA events are dangerous activities and that the participation in said events, as either a contestant, and employee, or volunteer, exposes the participant to a substantial and serious risk of property damage, personal injury, or death. The undersigned expressly acknowledges that his/her participation will involve such hazards.

Release of Sponsors: RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the rodeo committee, stock contractor, rodeo association, sponsors, arena operators or owners, and each of them, their officers, agents and employees (all hereafter collectively referred to as "Releasee") from any and all claims and liability arising out of strict liability or ordinary negligence of Releasee, or any other participant which causes the undersigned injury, death, damages, or property damage. We, the undersigned, jointly and in common, covenant to hold Releasee harmless and to indemnify releasee from any claim, judgment or expenses releasee may incur arising out of any of this minor's activities or presence in the restricted area.

Assurances: The undersigned has full power, authority, capacity, and right without limitation to execute, deliver, and perform this release.

Rules: The undersigned agrees to abide by all rules governing KJRA

Binding Effect: This release shall be binding upon the undersigned and the undersigned's spouse, legal representatives, heirs, successors, and assigns.

Note: All participants must have the following notarized by their parent or guardian regardless of age.

Consent to Treat: I hereby give the local EMS or local hospital the right to treat the above listed child/children, which I am the parent or guardian of, should the need arise.

I have read the above release in full. I totally understand its terms and conditions, and I hereby voluntarily execute and deliver this consent to contestant's attendance/participation in any/all KJRA events. I further agree to be fully bound by the terms and conditions of the release in both an individual capacity and in my capacity as parent or legal guardian for the undersigned.

Parent/Guardian Signature: _____ **Date:** _____

**Please note that this form MUST be notarized. This rule will be strictly enforced.

Notary _____ **Commissions Expired:** _____