

Malakoff Young Farmers Run For Roses Barrel Race Entry Form

Event Date: Sat., Feb. 16, 2013

10:00 p.m. at Malakoff Ag Arena
Malakoff, TX

Contestant's Name: _____ Address _____
City/State _____ Zip _____ Telephone _____ DOB: _____
Age (as of 9/1/12) _____

*****Barrels*****

Exhibition Barrels	\$4.00 each or 3 @ \$10.00	#	\$
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5D Open Barrels

1/2 sheet

5D Barrels @ \$25.00

Horse #1		\$
Horse #2		\$
Horse #3		\$
Horse #4		\$
Horse #5		\$
Horse #6		\$
Horse #7		\$

Arena/Secretary Fee (per contestant) + \$5.00

\$

Grand Total
NO REFUNDS AFTER CLASS BEGINS..... ALL FEES MUST BE PAID BEFORE CLASS BEGINS

Liability and Photo Release

We/I, the undersigned, assume full and complete responsibility for any injury or accident which may occur during the contestant's participation in this rodeo, or while each of us are on the premises of the event; and We/I, the undersigned, hereby release and hold harmless Malakoff Young Farmers Stampede, and in doing so, release Malakoff I.S.D., Malakoff Young Farmers, Stock Contractors, and/or any other persons or entities associated with this event or their agents or employees, or otherwise, herein referred to as releasees.

In consideration for value received, receipt whereof as acknowledged, I hereby give Malakoff Young Farmers Stampede/Malakoff Young Farmers the absolute right and permission to copyright and/or publish, and/or resell photographic portraits or pictures or video tape of me, or in which I may be included in whole or in part, for art, advertising, trade or any other lawful purpose whatsoever.

We the undersigned, further AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost that they may incur due to the presence of any of the undersigned in or upon the restricted area, premises or in any way observing, or for any purpose participating in the event and whether caused by the negligence of the releases or otherwise.

We, the undersigned further ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE DUE TO THE NEGLIGENCE OF RELEASEES OR OTHERWISE WHILE IN OR UPON THE RESTRICTED AREA AND/OR WHILE OBSERVING, OR FOR ANY PURPOSE PARTICIPATING IN THE EVENT.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS, INCLUDING CLAIMS CAUSED BY THE NEGLIGENCE OF RELEASEES.

I UNDERSTAND I ASSUME ALL RISK INHERENT IN THIS RODEO.

I VOLUNTARILY SIGNED MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS.

I further certify that I have available at the request of event management, a current NEGATIVE EIA TEST CHART on each animal I have on the event grounds. I understand that if State and local Authorities require presentation of said test chart at this event and I cannot present a NEGATIVE EIA TEST CHART per any horse, I will be responsible for any fines personally, and responsible for reimbursement of any fines to the event producer.

EACH PARENT OR GURDIAN SIGNED BELOW IS SIGNING INDIVIDUALLY AND ON BEHALF OF THE CHILD.

Contestant Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **and/or** _____

Father's signature

Mother's signature

Make check or money orders payable to: Malakoff Young Farmers

Total amount paid: _____ Notary Signature _____

_____ Cash

_____ Check # _____ Received by: _____