

# Michigan High School Rodeo Entry Form

MiHSRA Fall Cutting Event

Greg Flowers 9770 E Butler Rd Nashville Mi 49073

August 29<sup>th</sup> at 9am check in at 8:30am

Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent or Guardian's Complete Signature Must Appear Opposite Each Event Entered

(Fill in Circle for Event Entered)

1<sup>st</sup> GO \_\_\_\_\_

2<sup>nd</sup> GO \_\_\_\_\_

## Medical Release and Waiver of Liability

We, the parents or guardians of \_\_\_\_\_ give the local hospital and the physicians on staff of the hospital permission to administer necessary emergency treatment for injuries he/she may incur while participating in the Michigan High School Rodeo. We hereby release the hospital, physicians on the medical staff, the rodeo sponsors from all liability except for negligence. We also do hereby release and discharge the stock contractors, property owners and Michigan High School Rodeo Association, its officers, agents, and employees from any and all claims, demands, damages, suits, actions or causes of actions which may be suffered by said son or daughter while participating in Michigan High School Rodeo or from any claim, demands, suits, actions or causes of actions which may be suffered by myself or by a family member while assisting before, during and after said Rodeo. This release is complete and full and is not contingent upon any act, work, or deed by either the undersigned or sponsoring bodies and individuals of said rodeo.

Signed: \_\_\_\_\_ and \_\_\_\_\_

Checks Payable to Michigan High School Rodeo Association

MHSRA Treasury \$30

Point Scholarship Fee \$10

Entry Fee \$12 X \_\_\_\_\_ events = \$ \_\_\_\_\_

Total amount of Entry 1<sup>st</sup> GO \$ \_\_\_\_\_ + 2<sup>nd</sup> GO \$ \_\_\_\_\_ = total entry \$ \_\_\_\_\_

MHSRA Treasury \$30

Point Scholarship Fee \$10

Entry Fee \$12 X \_\_\_\_\_ events = \$ \_\_\_\_\_

Bring this form with payment to Rodeo Check In