

Michigan High School Rodeo Entry Form

Boys or Girls Cutting Horse Events

Name and Location of Cutting Event: _____

Date of Event: _____

Name _____ Phone # _____ Member# _____

Address _____ City _____ State _____

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

High School Events (Fill in Circle for Event Entered)

O 1st Go _____ \$12

O 2nd GO _____ \$12

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 _____ **Both Parents must sign Waiver**

Checks Payable to Michigan High School Rodeo Association

Fees are MiHSRA Office Fee \$30.00 per go \$60 if both goes are entered Total\$ _____

Scholarship Fee \$10.00 per go \$20 if both goes are entered Total\$ _____

Event/Go Round Fee \$12.00 per go \$24 if both goes are entered Total\$ _____

Make checks payable to Michigan High School Rodeo Association Total Due \$ _____