



MEMBERSHIP FORM 2023-2024

1 Member - \$45 2 Members - \$55
 3 Members - \$65 4 Members - \$75 (Max. Due)

Child 1	Grade in School as of 8/31/2023	DOB	M/F
Child 2	Grade in School as of 8/31/2023	DOB	M/F
Child 3	Grade in School as of 8/31/2023	DOB	M/F
Child 4	Grade in School as of 8/31/2023	DOB	M/F

Address _____ E-mail _____

City _____ State _____ Zip _____ Phone # _____

1 Shirt Size: Adult _____ Youth _____ Coat/Jacket Size: Adult _____ Youth _____
 2 Shirt Size: Adult _____ Youth _____ Coat/Jacket Size: Adult _____ Youth _____
 3 Shirt Size: Adult _____ Youth _____ Coat/Jacket Size: Adult _____ Youth _____
 4 Shirt Size: Adult _____ Youth _____ Coat/Jacket Size: Adult _____ Youth _____

Office Use Only <u>Total Amount Paid</u>
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Copy of grade card (1st graders on up) or birth certificate (kindergarteners or younger) must be on file by second rodeo weekend contestant competes in.

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

Acknowledgment of Risk: The undersigned acknowledges that the HYRA events are dangerous activities and that the participation in said events, as either a contestant, an 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: The undersigned being fully aware that participation in the HYRA events will expose him/her to a substantial and serious risk of property damage and/or personal injury or death, hereby releases all sponsors from liability for any and all property damage, personal injuries, or other claims arising from the undersigned's participation in said events including those that are known, unknown, foreseen, unforeseen, future, or contingent.

Covenant Not to Sue: The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit, or other proceeding against the sponsors (or their officers, secretary, directors, employees, agents, or affiliates) concerning, arising out of, or related to the actions, causes, action, claims and demands hereby waived, released or discharged by the undersigned.

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 HYRA.

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

Note: All Participants under 18 yrs. of age must have the following notarized by their parent or guardian.

Consent to Treat: I hereby give the EMS or PA's and the Area Hospitals 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 completely understand the terms and conditions, and I hereby voluntarily execute and deliver this consent to contestant's attendance/participation in any and all HYRA 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.

 Mother/Guardian Signature Date

 Father/Guardian Signature Date

 Mother/Guardian Print Date

 Father/Guardian Print Date

NOTARY: (Notary is required to participate) On this _____ day of _____ 20_____, before me, personally appeared _____ to me known to be the persons who executed the foregoing Release and Acknowledged that they signed same as their fee act and deed.

Notary Public Signature: _____ My commission expires: _____

Send to: Melissa Tetrick, 1084 SW 20 St, Kingman, KS 67068 - Fax 620-532-1497 - Email melissatetrick@gmail.com