

Hyde and Buckle Promotions Barrel Race Entry Form

Name _____

Phone # _____ BBR # _____

Address:

Street _____

City _____

State _____ Zip _____

Email Address: _____

Horses Registered Name & (Nickname): _____

Mare__ Stallion__ Gelding__

Horses Registered Name & (Nickname): _____

Mare__ Stallion__ Gelding__

Horses Registered Name & (Nickname): _____

Mare__ Stallion__ Gelding__

Horses Registered Name & (Nickname): _____

Mare__ Stallion__ Gelding__

Horses Registered Name & (Nickname): _____

Mare__ Stallion__ Gelding__

Amount Paid or enclosed: _____

Payment Method: _____

Emergency Contact _____

Relationship _____

Phone # _____

ASSUMPTION OF RISK, WAIVER OF LIABILITY, INDEMNIFICATION AND RELEASE FOR INJURY OR DEATH TO

PERSON OR PROPERTY: By signing this document and/or making entry as a participant, I hereby understand that no matter how careful the sponsors, officers, Sanctioning Organization, directors, agents, contractors (herein referred to as Producer) or participants may be, my injury or death, as well as that of my property, my horse, or my child is a possibility. I understand that competition in equine events carries inherent risks, including physical injury or death. I assume all risk, as permitted by law, for any damage, injury or death to myself, my child, my property, or my horse in connection with participation in this event, and I waive any claim that my child or I might state against the Producer or those doing business as such. I understand that the intent of this release is to extinguish liability for the Producer and all associates, including Sanctioning Organizations, for damage, injuries or death to my child, my property, my horse, or me. And furthermore, I, as a participant (or parent/guardian of a participant) agree to hold harmless the Producer and associates or Sanctioning Organization from any expense, cause of action, damage, or claim of damage (including legal fees) of any kind whatsoever, which any person or business entity might assert as a result of my (or my child's or horse's) participation in this event. I also understand that all contestants and horses will be photographed and videoed and all rights to such photographs or video recording are the sole property of the Producer – By the appearance of my signature as indicated below, I certify that I am 18 years of age or older, or that I am the parent or legal guardian of the participant/entrant who is under the age of 18. I further certify that I have available at the request of event management, a current health certificate and a COGGINS on each animal I have on the event grounds. I understand that if State and/or Local Authorities require presentation of said test charts at this event and I cannot present a current health certificate and a COGGINS for any or all animals, I will be personally responsible for any fines and will be responsible for any fines levied on the event Producer, the venue, or any of their agents, employees, officers, directors, contractors or assigns. My signature below acknowledges the fact under law that I understand and agree to the provisions stated above.

Signed _____ Printed _____ Date _____