

## 2025 Southern Association Youth Rodeo Release Form

West Ga Jr Rodeo Association DBA Southern Association Youth Rodeo, hereby known as WGJR and SAYR:

**VOLUNTARY PARTICIPATION:** I agree that I, the undersigned, do for myself or on the behalf of my child, spouse, or legal ward, hereby voluntarily participate in the above stated event, and that I/we participate in this event totally at our own risk for injuries or property damage we may incur in relation to this event.

**PERSONAL/FINANCIAL LOSSES:** I agree that I am responsible for my own financial loss in relation to the theft or damage to our tack, equipment, vehicles, trailers and horses while on the premises where this event is held.

**LIABILITY RELEASE:** I agree that I hereby, for myself, my family members, my heirs, administrators, personal representatives and assigns, do agree to hold harmless, release and discharge WGJR DBA SAYR, its owners, agents, employees, officers, directors, representatives, assigns, members, premises owners, affiliated organizations, insurers and others acting on its behalf, of all claims, demands, causes of action, and legal liability, whether the same be known or unknown, anticipated, due to WGJR DBA SAYR's gross negligence; and do further agree that I shall bring no claims, demands, legal actions and causes of action, against them and their associates as stated above in this clause for any economic and non-economic losses due to bodily injury, death or property damage, sustained by me and/or my minor child, children or legal ward, in relation to the premises and operations of the WGJR DBA SAYR, to include but not limited to, while riding, handling, or otherwise being near horses or other equine species or livestock.

**MEDICAL TRANSPORT:** I understand that I am being informed that emergency transport may not be on the rodeo grounds at all times during a rodeo performance. EMT, paramedic and/or transport will be called upon should the need arise. Flight for Life should be available if any life-threatening injury occurs. Persons with experience in CPR will be on the grounds. This we would like for all members to be aware of. Knowing this; you fully release WGJR DBA SAYR, its members and associates, the property owners of all rodeo arenas, and its associates from any liabilities for the 2025 rodeo season. You compete in this rodeo under your own free will knowing the above.

\*\*\*WGJR DBA SAYR WOULD LIKE TO SUGGEST THAT ALL RIDERS UNDER THE AGE OF SIXTEEN (16) WEAR A PROTECTIVE HELMET IN ALL RIDING EVENTS FOR SAFETY. \*\*\*

I HAVE READ THE ABOVE INFORMATION AND NOTICE REGARDING HEADGEAR AND MEDICAL TRANSPORT AND UNDERSTAND FULLY.

Name of minor participant: \_\_\_\_\_

Each Parent or Legal Guardian of the minor Participant under 18 years & older listed above must sign below.

I, UNDERSTAND, BEING OF LEGAL AGE, HAVE READ AND UNDERSTAND THE FOREGOING AGREEMENT AND RELEASE WAIVER.

DATED ON: \_\_\_\_\_, 2025

SIGNATURE OF Participant or PARENT/LEGAL, COURT APPOINTED GUARDIAN/PARTICIPANT(s): \_\_\_\_\_

Phone # \_\_\_\_\_

NAME of ALL family participants: \_\_\_\_\_

This Release and Waiver was signed before me on \_\_\_\_\_, 2025.

NOTARY PUBLIC \_\_\_\_\_ MY COMMISSION EXPIRES: \_\_\_\_\_