

Last Name

Camp Verde Arena Association FORT VERDE DAYS RODEO

Volunteer Participant Application and Waiver

_____First Name______

Address							
City		State_					
Cell Phone	Other						
E-mail Address							
CVAA Member: Yes or							
<u>Mino</u>	or (under age 18) mu	st have parent/guardia	n sign on bottom of page				
It is the policy of Camp Verde Are based on disability, age, sex, race		•					
Grounds:	OCT 7 @4pm PERF	OCT 7 @ 10PM SLACK	OCT 8 SLACK @1pm SLACK	OCT 8 @ 4PM PERF			
Parking:		N/A	N/A				
Facility Maintenance:							
Ticketing:		N/A	N/A				
Gate Security:		N/A	N/A				
Hospitality: (Must be 21 & Over) Beverage Bartender:		N/A	N/A				
Arena: Arena Volunteer:							
Timed Events:							
Roping Chutes:							
Mutton Busting:		N/A	N/A				
Volunter/Parent/Guardian Name	:						

campverdearena@gmail.com

www.campverdearena.com

Each person must sign/initial the waiver

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

(READ CAREFULLY BEFORE SIGNING)

IN CONSIDERATION of being permitted to officiate, observe, work for, use the arena, use the grounds, use the facilities, or participate in any way in any Camp Verde Arena Association, Inc (CVAA, Inc.) rodeo, events or activities (EVENTS), I, For myself, my personal representatives, heirs and next of kin:

- 1. Herby RELEASE, WAIVE and DISCHARGE CVAA, Inc., the Town of Camp Verde, the promoters, participants, sanctioning organizations or any affiliate, subsidiary or subdivision thereof, sponsors, advertisers, owners, and lessees of premises used to conduct the EVENTS, premises and event inspectors, surveyors, underwriters, consultants, and others who give recommendations, directions, or instructions or engage in risk evaluation or less control activities regarding the premises or EVENTS and for each of them, their directors, officers, agents, members and employees, all for the purposes herein referred to as "RELEASEES", FROM ALL LIABILITY TO ME, my personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOAUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN THE DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENTS, INCLUDING CLAIMS FOR WORKMANS COMPENSATION BENEFITS, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. In addition, I COVENANT NOT TO SUE any of the RELEASEES based upon any claim arising out of any of the EVENTS.
- 2. Hereby Acknowledge that I am not an employee of CVAA, INC., nor am I entitled in any away to workman's compensation benefits, and I ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENTS whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
- 3. Hereby AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS THE RELEASEES and each of them from any loss, liability, damage, or cost they may incur due to claims brought against the RELEASEES arising out of my injury, or death, or damage to my property while I am in the RESTRICTED AREAS and/or while competing, practicing, officiating, observing, or working for or for any purpose participating in the EVENTS and whether caused by the negligence of the RELEASEES or otherwise.
- 4. Hereby acknowledge that RODEO EVENTS ARE POTENTIALLY VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. I also expressly acknowledge that INJURIES MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
- 5. Hereby agree that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the RELEASEES, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the STATE of ARIZONA and that if any portion thereof is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE FULLY SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

	VEDDE	ADENIA	ASSOCIAT	
LAIVIP	VERIJE	AKFIVA	ASSULIA	HUJIN. HINU.

FORT VERDE DAYS RODEO OCTOBER 7-8, 2022

MINOR RELEASE 1. I hereby give my permission and consent for my above-named son/daughter/ward (the MINOR) to attend and to participal compete) in all events or activities conducted, sanctioned, and/or administered by CVAA, INC. 2. I hereby, on behalf of myself and my above named MINOR, ASSUME FULL RESPONSIBILITY for any risk of loss sustained by of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise. Signature: Parent or Guardian Printed Name Date of the MINOR) to attend and to participal competed by CVAA, INC. 2. I hereby, on behalf of myself and my above named MINOR, ASSUME FULL RESPONSIBILITY for any risk of loss sustained by of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise.	nature		Date			
 I hereby give my permission and consent for my above-named son/daughter/ward (the MINOR) to attend and to participal compete) in all events or activities conducted, sanctioned, and/or administered by CVAA, INC. I hereby, on behalf of myself and my above named MINOR, ASSUME FULL RESPONSIBILITY for any risk of loss sustained by of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise. Signature: Parent or Guardian Printed Name Date of the MINOR of	dress	City	State	ZIP	Phone	Area Working in
compete) in all events or activities conducted, sanctioned, and/or administered by CVAA, INC. 2. I hereby, on behalf of myself and my above named MINOR, ASSUME FULL RESPONSIBILITY for any risk of loss sustained by of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise. Signature: Parent or Guardian Printed Name Date of the RELEASEES or otherwise.			MINOR RE	ELEASE		
I hereby, on behalf of myself and my above named MINOR, ASSUME FULL RESPONSIBILITY for any risk of loss sustained by of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise. Signature: Parent or Guardian Printed Name Date		, 5	•	. •	•	to attend and to participate (including
of or related to the events or activities whether caused by the negligence of the RELEASEES or otherwise. Signature: Parent or Guardian Printed Name Da		, ,			• •	any risk of loss sustained by us arising out
Signature: Parent or Guardian Printed Name Da						
			,	, 0		
Responsible Contact for Day of FVENTS:	nature:	: Parent or Guardian	Printed Nan	ne		Date
11016	sponsib	ole Contact for Day of EVENTS:			Phone_	
Chairman Approv						Chairman Approval
Director Approx						Director Approval