

WAIVER OF LIABILITY
FILL OUT COMPLETELY

WE, THE UNDERSIGNED, PARENTS (SURVIVING PARENT OR GUARDIAN) OF :

Name of Contestant

A minor, do hereby release and discharge THE WYOMING HIGH SCHOOL RODEO ASSOCIATION, THE AMERICAN LEGION HIGH SCHOOL RODEO COMMITTEE, THE AMERICAN LEGION, DEPARTMENT OF WYOMING, IT'S POSTS, OFFICERS, AGENTS AND EMPLOYEES, from any and all claims, demands, damages suits, actions, or causes of action which we (I) may, can or shall have by reason of any illness, injury or accident incurred or suffered by said son (or daughter) while participating in the WYOMING HIGH SCHOOL AND/OR JUNIOR HIGH SCHOOL STATE FINALS RODEO:

WE THE PARENTS OR GUARDIANS OF

Name of Contestant

Give the local hospital and the physicians of the Medical Staff of the local hospital permission to administer necessary emergency treatment for injuries he or she may incur while participating in an approved High School or Junior High rodeo. We understand that each contestant must be and is covered by medical insurance. We hereby release the Hospital, Physicians on the Medical Staff, and the rodeo Sponsors from all liability.

_____ and _____

(Both parents or Guardian(s) must sign)

This release is complete and full, and is not conditioned upon any act, word or deed by either the undersigned or the sponsoring bodies and individuals of said Rodeo.

Dated this _____ day of _____, 20_____.

(*)

Father's (or Guardian) Signature

(*)

Mother's (or Guardian) Signature

Mailing Address

City

State

Zip

Subscribed and sworn to before me, this _____ day of _____, 20_____.

Notary Public

***(ALL SIGNATURES ABOVE MUST BE IN FRONT OF THE NOTARY-due with membership**

