

**Mississippi High School Rodeo Association**  
**2020-2021**

**CONSENT TO EMERGENCY TREATMENT & MINOR'S RELEASE FORM**

We, the parents of \_\_\_\_\_ (name of contestant), in consideration of being granted the right and privilege to participate in the High School Rodeos sanctioned by the Mississippi High School Rodeo Association, being duly sworn on oath, do hereby give permission for the contestant to enter and participate in said rodeos. We give the local hospital and the physicians on the medical staff of the hospital permission to administer necessary emergency treatment for the injuries he or she may incur while participating in the High School Rodeos. We hereby release the local hospital, physicians on the medical staff and Rodeo Sponsors from any and all liability.

Father's Signature: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_

Contestant's Signature: \_\_\_\_\_

Contestant's Printed Name: \_\_\_\_\_

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NOTARY SECTION

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

SUBSCRIBED AND SWORN TO THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ MY COMMISSION

EXPIRES: \_\_\_\_\_

(NOTARY PUBLIC)

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**This FORM MUST BE UPLOADED to your National Membership Profile once completed.  
Use the STATE FORMS Document title and STATE APPLICATION Document Category.**