

San Dimas Rodeo

Western Days Buckaroo Rodeo

(Challenged Youth Event)

Waiver Release of Liability, Indemnity Agreement and Medical/Photo Authorization



In consideration for allowing the minor named hereinbelow the ("Minor") to participate in the San Dimas Western Days Buckaroo Rodeo event, the undersigned Minor's parent and/or guardian (the "Parent/Guardian") acting on behalf of the Minor, hereby waives, releases, and discharges the San Dimas Rodeo, Inc. and its board members, volunteers, contractors, and agent, the City of San Dimas and the Professional Rodeo Cowboys Association (the "PRCA") for personal injury or property damage which may accrue to the Minor and/or Parent/Guardian as a result of participation in the Western Days Buckaroo Rodeo Event.

It is hereby agreed that San Dimas Rodeo, Inc., its Board Members, volunteers, contractors, agents, and each of them, the City of San Dimas and the PRCA, shall not be responsible or liable for any injury, damage, other loss to the Minor or me, or to my property or the "Minors" property incurred while accompanying any member of the San Dimas Rodeo, Inc. or representatives thereof during the performance of their assignments whether the injury damage or other loss occurs by reason of negligence, dangerous conditions of public property or otherwise.

For myself, my heirs, executors, administrators, and assigns, the undersigned Parent/Guardian agree to defend, indemnify and hold harmless the San Dimas Rodeo, Inc. its board members, volunteers, contractors, agents, the City of San Dimas and the PRCA against any and all manner of actions, claims, causes of actions, suits, debts, demands or damages or liability or expense of any kind and nature incurred or arising by reason of any actual or claimed act or omission, or injury sustained by the Minor and/or by the Parent/Guardian.

In the event of sudden illness, accident or injury which may occur while said Minor and/or Parent/Guardian are participating in the San Dimas Western Days Rodeo event, and the undersigned Parent/Guardian cannot be contacted, I hereby give my consent to any physician licensed in the State of California pursuant to Civil Code Section 25.6 to perform such emergency medical treatment as may be necessary under the circumstances. I authorize San Dimas Rodeo, Inc. to give consent on my behalf of the Minor for such emergency medical treatment as may be necessary.

The Parent/Guardian, individually and on behalf of the Minor, additionally agrees that photographs and/or digital reproductions of the Parent/Guardian and/or Minor's participation in the San Dimas Rodeo are the sole and exclusive property of the San Dimas Rodeo, Inc. and may be used for corporate, advertising or promotional purposes without further consent, authorization or consideration.

*Name of Child: _____ (the "Minor") *Phone: _____

*Address: _____ *Birth Date: _____

_____ *Age: _____

*Minor's Parent or Guardian: _____ (the "Parent/Guardian")
(Signature)

*Minor's Parent or Guardian: _____ *Date: _____
(Please Print Name)

*Minor's Parent or Guardian Email Address: _____

Please list additional name and phone number to be used in case of emergency. (Optional)

Name: _____

Phone: _____

*** Indicates required information**

Complete and mail to:
Challenged Buckaroos Rodeo PO Box 3180 San Dimas Ca, 91773
OR Fax to: 909-394-1233