

**Carney Round-up Rodeo
Rodeo Reality Ride Amateur Bull Riding
June 6-7, 2009**

**Nadeau Township Hall
US 41, Carney, Michigan 49812**

This is a chance for male and female amateur bull riders ages 14 and up to ride a bull in an official rodeo! There are 16 slots open (8 for each performance). The performances will be on Saturday, June 6, 2009 at 5:00 pm (Central time) and on Sunday, June 7, 2009 at 1:00 pm (Central time).

We will let you know which day you will be competing. All bull riders must be at the arena a minimum of one hour before the beginning of the performance.

Equipment Needed:

1. Riding Glove
2. Hockey-type helmet (recommended but not required)
3. Bull rope
4. Spurs
5. GUTS!

We would prefer that you bring your own equipment, but completely understand if you don't.

ENTRY FORM

**Carney Round-Up Rodeo
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June 6-7, 2009**

DEADLINE FOR ENTRY: MAY 24, 2009

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Date of Birth: _____

Grade in School: _____ Where do you attend school? _____

Why do you want to ride a bull? _____

Events Participated In: _____

Awards Won: _____

Future Endeavors: _____

Please read the following statement and sign below:

_____ desires to participate in the Rodeo Reality Ride Amateur Bull Riding competition at the Carney Round-Up Rodeo on June 6-7, 2009. The above information is true and is not intended to be misleading. In the event that the information is discovered to be false or intentionally misleading, certification will be revoked, any awards or purses will be returned, and ineligibility for future participation may be issued. Except in the event of gross negligence on the part of the Carney Round-Up Rodeo Committee or the volunteers associated with the Carney Round-Up Rodeo, I shall bring no claims, demands, actions and causes of action, and/or litigation against Nadeau Township, the Carney Round-Up Rodeo Committee, and the volunteers for any economic or non-economic loss due to bodily injury, death, and/or property damage sustained to me and/or my minor child or legal ward while participating in the events of the Carney Round-Up Rodeo. The Carney Round-Up Rodeo Committee, Nadeau Township, and any other co-sponsoring organizations, if any, shall not be responsible for any personal injury, or for loss or damage to property occurring at any Carney Round-Up Rodeo activity. Each owner, exhibitor, handler or consignor shall indemnify and hold harmless the Carney Round-Up Rodeo Committee, Nadeau Township, and its officers, directors, employees and volunteers from and against all claims, demands, causes of actions and expenses of every kind, including attorney's fees, arising out of or related in any manner to the acts or commissions of any owner, handler, exhibitor, or consignor. Presentation of signed entry or

consignment forms shall be deemed acceptance of the conditions of this rule. In the event an entry or consignment form is not signed or presented, appearance on the grounds of the Carney Round-Up Rodeo activity as an exhibitor, handler, owner, or consigner shall be deemed to be acceptance of the conditions of this rule.

By signing, you agree that you have read and understand the rules that apply to this event.

Parent Signature

Competitor Signature

Date

Date

Emergency Medical, Dental or Surgical Treatment of a Minor

I, _____, am the (mother) (father) (guardian) of _____, a minor who is participating in the Carney Round-Up Rodeo Dream Ride. I hereby consent to any medical, dental or surgical treatment or procedure of an emergency nature that is reasonably necessary. Any known allergies (medication/ medical supplies): _____

Insurance Company: _____

Policy Number: _____

Emergency Phone Numbers: _____

Contact Person: _____

I understand that should medical emergency treatment be required, the current insurance information listed above will be provided to the attending clinic/hospital to cover future payment of incurred bills. Furthermore, I agree I will be financially responsible for treatment or procedure that is not covered by insurance. The Carney Round-Up Rodeo will have no financial responsibility for said treatment or procedure.

Signature of Guardian: _____ Date: _____

Signature of Witness: _____ Date: _____

Mail Completed Entry Form and Check or Money Order for \$25.00 Before May 24, 2009 to:

Carney Round-Up Rodeo
c/o Hudson's
N13421 J1 Road
Carney, MI 49812

906-639-2618