

**Carney Round-Up Rodeo  
Rodeo Reality Ride Mutton Bustin'  
June 6-7, 2009**

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

Rodeo Reality Ride Mutton Bustin' allows children ages 5-12 (weighing less than 70 pounds) to ride a sheep. Mutton Bustin' is limited to 12 slots (six in each rodeo performance). The performances will be on Saturday, June 6, 2009 at 5:00 pm (Central time) and Sunday, June 7, 2009 at 1:00 pm (Central time).

There is no entry fee, but the first to sign up will be the first to ride.

All riders will be given a score. There will be a winner for each performance.

**Rules**

1. HOLD ON TIGHT AND DON'T FALL OFF!

# ENTRY FORM

## Carney Round-Up Rodeo Rodeo Reality Ride Mutton Bustin' June 6-7, 2009

Nadeau Township Hall  
US 41, Carney, Michigan

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 and be a mutton buster? \_\_\_\_\_

Please read the following statement and sign below:

\_\_\_\_\_ desires to participate in the Rodeo Reality Ride Mutton Bustin' 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 consigner 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 Entry Form Before May 24, 2009 to:**

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

906-639-2618