



**Where Age is Only a State of Mind!**  
**www.wspbr.com**

Age: \_\_\_\_\_

WSPBR Card # \_\_\_\_\_

APPLICANT INFORMATION:		
Name:	Date of Birth:	
Social Security Number:	Phone Number:	Alt. Phone Number:
Address:		
City:	State:	Zip
EMERGENCY CONTACT:		
Name:	Relationship:	Phone Number:
AGREEMENT:		
<p><b>ACKNOWLEDGEMENT OF RISK:</b> The undersigned acknowledges that Rodeos (bull riding) are dangerous activities and that participation in Rodeo as a Contestant, Spectator, Employee, or Volunteer exposes the participant to a substantial and serious risk, property damage, personal injury, or death. The undersigned expressly acknowledges that his/her participation in the rodeo involve such hazard.</p> <p><b>RELEASE OF SPONSORS:</b> The undersigned, being fully aware that participation in the Rodeo will expose him/her to substantial and serious risk of property damage and/or personal injury or death hereby releases all Sponsors from liability for any and all damage, personal injury, or other claims arising from the undersigned participation in the Rodeo, including those that are known and unknown, foreseen and unforeseen, future or contingent.</p> <p><b>COVENANT NOT TO SUE:</b> The undersigned covenants that the undersigned shall not now or at any time in the future directly or indirectly, commence or prosecute any action, suit, or other proceedings against the WSPBR, Stock Contractors, Sponsors, Officers, Directors, Employees, Agents, or affiliates concerning, arising out of, or related to the actions, causes of actions, and demands are hereby waived, released or discharged by the undersigned.</p> <p><b>ASSURANCE:</b> The undersigned has full power, authority, capacity, and right without limitation to execute, deliver, and perform this release.</p> <p><b>BINDING EFFECT:</b> This release shall be binding upon the Undersigned and the Undersigned's spouse, legal representation, heirs, successors, and assigns.</p>		
SIGNATURES:		
<p><b>This release has been carefully read by the undersigned and the undersigned fully understands its contents and conditions and has been voluntarily executed and delivered this release as of the _____ day of _____.</b></p>		
Signature of Applicant	Date	

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
 State of \_\_\_\_\_ Notary Public \_\_\_\_\_  
 City & County of \_\_\_\_\_ My Commission Expires \_\_\_\_\_