

# Converse County Youth Rodeo 7/22/24 @ 4:00pm

Contestant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Age: \_\_\_\_\_ (on day of rodeo)      Gender:    Boy    Girl (circle one)

<b>PeeWee (7 &amp; Under)</b>	<b>Junior (8-12)</b>	<b>Senior (13-18)</b>
Ribbon Snatching(____) \$5	Goat Tying    (____) \$5	Goat Tying    (____) \$5
Barrels                    (____) \$5	Barrels                    (____) \$5	Barrels                    (____) \$5
Dummy Roping    (____) \$5	Breakaway    (____) \$5	Breakaway    (____) \$5
Poles                    (____) \$5	Poles                    (____) \$5	Poles                    (____) \$5

**TOTAL:** \_\_\_\_\_

Make check payable to: **Converse County Fair**

Mail Entry Form, Fees, and Waiver to:

**Karmin Addleman**  
**2085 Cold Springs Rd.**  
**Douglas, WY 82633**

Call 307-359-9197 for any questions

## **ENTRIES MUST BE POSTMARKED JULY 12, 2024**

I give consent for participation of the contestant whose name appears on this form in the Converse County Youth Rodeo. I hereby release the rodeo sponsors and its agents from any and all liability for damages that may occur to the contestant, contestants horse, including illness, or contestants equipment while competing.

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_ OR Email: \_\_\_\_\_



**RELEASE FROM LIABILITY AND  
CONVENANT NOT TO SUE**

I, being fully aware of the risk of injury, serious injury, or death, hereby request that I be allowed to participate in any act associated with Converse County Fair and I assume all associated risks. The Converse County Fair Board (CCFB), and any of its agents, employees, or assigns, either individually or collectively, shall not be liable for any injuries or damage I incur, or be subject to any claims, demands, or causes of action for injury or damage of any kind whatsoever, including injuries or damages resulting from the negligence of it or its agents, employees, invitees, or assigns. I, for myself and on behalf of my guests, heirs and personal representatives, do hereby expressly and voluntarily waive, release, and discharge the CCFB and its agents, employees, and assigns from any and all claims, demands, or causes of action and agree not to sue and expressly waive the right to sue it or its agents, employees, or assigns for any cause of action arising from my participating in any act associated with Converse County Fair or use of the premises.

I understand that I may not possess or consume alcohol during the Converse County Fair.

I have read and agree to the above.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Printed Name of Exhibitor/Participant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature