



# MUTTON BUSTIN' ENTRY FORM & WAIVER

## NBC Independence Day

### July 6, 2019 - Weaverville, California



Contestant's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

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

#### PLEASE READ AND INDICATE YOUR AGREEMENT BY INITIALING EACH ITEM

1. Entry form must be fully and accurately completed along with a copy of your Driver's License.
2. Children between the ages of 4 to 7 may enter in the MUTTON BUSTIN' contest.
3. Permission and **full waiver** and release of any and all liabilities associated with participating in the MUTTON BUSTIN' contest is required by Contestant's parent or guardian.
4. All entries selected must have and wear **protective gear**, including a helmet, and a mouthpiece.
5. You and your child are required to **check in** with the MUTTON BUSTIN' Director starting at **6:00 PM**, but no later than **6:30 PM** on the date of the performance. Please check in at the **Diamond W Tent** located at the entrance to the event.
6. Family members of the contestant need to **purchase tickets** to the event. We suggest Reserved Ringside Seats, which allow you close-up view.
7. All contestants receive a participant medal and the winner shall receive a handmade championship buckle, courtesy of Diamond W Western Wear.
8. Entries shall be filled on a **"first pay basis"**. A fee of **\$30** per MUTTON BUSTIN' entry is required.

#### AGREEMENT, WAIVER & RELEASE

I, \_\_\_\_\_, certify under penalty of perjury, that I am the parent, or legal guardian of the above named minor contestant. I agree to allow \_\_\_\_\_, who is a minor, to participate in the MUTTON BUSTIN' Contest at the 2019 NBC Independence Day. I am fully aware of all the risks associated with participating in such contests. I do hereby waive, release, and discharge any and all claims for damages, including but not limited to, personal injury, death, or personal property. I agree to waive and release Diamond Productions, Diamond W Western Wear, Rocking M Rodeo Productions, Trinity County Building and Grounds, all Sponsors, and all other entities and persons associated with this event, from any and all liabilities. I understand that this release shall also be binding on behalf of the above named minor.

I further agree to authorize medical treatment or medical procedures to the above named minor in case of an emergency during this event.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ Code: \_\_\_\_\_

Enclosed Check #: \_\_\_\_\_

Cash Paid (in Person Only)

You may mail, fax, or e-mail your form to  
info@dwwonline.com

For Office Use Only

Date Paid: \_\_\_\_\_

Contestant No: \_\_\_\_\_