

COLORADO COUNTY FAIR CALF SCRAMBLE MINOR'S RELEASE

I, or we, parent(s) or guardian(s) hereby grant permission and give our consent for my/our child _____ to participate in any and all activities involved with and pertaining to the calf scramble of the Colorado County Fair Association.

I, or we, further give permission to have emergency first-aid administered by any qualified person in case of injury to said minor child and to have said minor child transported by the most expedient means of conveyance to the nearest available physician, hospital, clinic, or medical facility and to their receive such treatment as is medically prescribed by a physician(s). In case of extreme injury, I or we, do further agree that the members of the calf scramble committee, the Colorado County Fair Association, its agents or employees, individually or collectively, shall NOT be held responsible or liable for personal injury or loss resulting either on the premises of the Colorado County Fair Grounds or in route to said facilities.

NAME OF PARTICIPANT: _____
ADDRESS: _____ CITY: _____ ZIP: _____
PHONE #: _____ AGE: _____ DATE OF BIRTH: _____
MALE _____ FEMALE _____ ADDITIONAL PHONE NUMBER(S) WHERE PARENTS MAY BE REACHED IN CASE OF EMERGENCY: _____

FAMILY PHYSICIAN: _____ PHONE #: _____

LIST ANY KNOWN MEDICAL PROBLEMS AND/OR PAST MEDICAL HISTORY WHICH MAY AFFECT YOUR PARTICIPATION IN THIS EVENT: _____

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU: _____
RELATIONSHIP: _____ PHONE#: _____

SIGNATURE OF APPLICANT: _____

SIGNATURE OF PARENT(S): _____ THE

STATE OF TEXAS COUNTY OF _____ BEFORE ME, the undersigned authority, on this day personally appeared _____, Known to me to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that such person(s) executed the same for the purposes and consideration therein expressed. GIVE UNDER MY HAND AND SEAL THIS _____ DAY OF _____, 20_____

My commission expires: _____ Notary Public for the State of Texas

Signature of Notary: _____