



431 South Cascade Ave.
 Colorado Springs, CO 80903
 Phone: (719) 447-4627
 Fax: (719) 447-4631

USE FOR 2010 MEMBERSHIP

Women's Professional Rodeo Association
JUNIOR MEMBERSHIP APPLICATION

CARD TYPE

WPROA Junior Division | \$150
 For girls less than 18 years old competing in WPROA Junior Division sanctioned or co-sanctioned events.

ATTENTION NEW MEMBERS:

To be eligible for the WPROA Youth Division, you must be under the age of 18 on Jan. 1 of the current Rodeo year and the date that you submit this application. All required documents (specifically your birth certificate and a notarized copy of this application) must be sent to the WPROA office within 30 days of original submission or membership and points earned will be suspended and void. Memberships are:

- NON-REFUNDABLE
- NON-TRANSFERABLE

RUSH SERVICE AVAILABLE - \$25
 48 business hour turnaround upon receipt by FAX/email/mail

Yes **No**

I WILL PAY BY:

Check **Credit Card***

*There is a \$10 service fee

Visa **MasterCard**

Discover **AMEX**

Card Number: _____

Security Code: _____

Expiration Date: _____

Billing Address: _____

City: _____

State: _____ Zip: _____

PAYMENT MUST BE RECEIVED BEFORE APPLICATION WILL BE PROCESSED.

If a WPROA Junior Division member turns 18 during a WPROA competition year, that member must immediately, upon turning 18, execute a Release and Waiver of Liability and Indemnity Agreement in favor of the WPROA in order to maintain her WPROA Junior Division membership and count points for the remainder of the competition year. The member may not compete at WPROA Junior Division events and no points may be earned on her Junior Division membership card until the member executes such Agreement in a form satisfactory to the WPROA. Upon turning 18, the member must contact the WPROA office to obtain the appropriate form of Agreement.

I am a **NEW** Member **RETURNING** Member Member No. _____

Legal First Name _____ MI _____ Legal Last Name _____

Name change from previous year? **Yes** **No**

Mailing Address Street Address 1 _____

City _____ State/Province _____ Zip _____

Phone (____) _____ Eve Phone (____) _____ Email _____

Citizen of **U.S.** **Other** Date of Birth / / (MM/DD/YEAR)

Birth Certificate **Will send in 30 days** **On file** SSN/EIN _____

Circuit Designation _____ Resident of this circuit? **Yes** **No**

Is the Circuit different from previous year? (N/A for new members): **Yes** **No**

CONSENT RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

WPROA members acknowledge that rodeos are dangerous activities and participants in a rodeo as a competitor, an independent contractor, or volunteer, exposes the participant to a substantial and serious risk of property damage, personal injury or death. WPROA members acknowledge that participation in WPROA/PRCA sanctioned rodeos/events will involve such a hazard. Being fully aware that participation in WPROA/PRCA sanctioned rodeos/ events will expose said member to substantial and serious risk of property damage and or personal injury or death, said member hereby releases WPROA, PRCA, and PRCA sponsors, and PRCA/WPROA sanctioned rodeo/event production entity, their affiliated, related or subsidiary companies, and the Officers, Directors, employees and agents of each entity or organization from liability for any and all property damage, personal injury or other claims arising from participation in the PRCA/WPROA sanctioned rodeos/ events, including claims that are known and unknown, foreseen and unforeseen, future or contingent. WPROA members shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against the aforementioned arising out of or related to the actions, causes of action, claims and demands hereby waived, released or discharged by WPROA member. This provision shall be binding upon each WPROA member, her spouse, legal representatives, heirs, successors and assigns.

PARENT/LEGAL GUARDIAN _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

PARENT/LEGAL GUARDIAN _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

CONTESTANT _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

CIRCUIT DIRECTOR _____ **EVENT** _____ **DATE** _____

WPROA MEMBERSHIP IS SUBJECT TO COMPLIANCE WITH ALL WPROA RULES. COMPLETE RULES ARE POSTED ON WWW.WPROA.COM. ALL PAPERWORK, INCLUDING YOUR BIRTH CERTIFICATE MUST BE IN THE WPROA OFFICE WITHIN 30 DAYS OF SIGNING THIS APPLICATION. FOR JUNIOR APPLICATIONS YOU WILL BE SENT MATERIALS FROM THE WPROA OFFICE WHICH NEED TO BE NOTARIZED. THE NOTARIZED MATERIALS MUST BE RETURNED TO THE WPROA WITHIN 30 DAYS OR THE APPLICATION WILL BE CANCELLED.

FOR OFFICE USE ONLY Date _____ Paid \$ _____ Payment Method _____
 Access _____ Packet Mailed _____



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CONSENT RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT (CONTINUED)

INSTRUCTIONS: Whether you are printing your application and mailing it to the WPRA office or e-mailing it to the WPRA office, you must also have this page notarized. You will be given 30 days from receipt of application to return this notarized document to the WPRA office. If it is not received within 30 days your application will be cancelled.

Please note, under Colorado Law, an Equine professional is not liable for any injury to or death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 13-21-119 of the Colorado Revised Statutes. Parents or Guardians are responsible for safety of children.

THE UNDERSIGNED HAVE READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY

INDEMNITY AGREEMENT, and further agree that no oral representation, statements or inducements apart from the foregoing written agreement have been made.

WE HAVE READ THIS DOCUMENT.

WE UNDERSTAND IT IS A RELEASE OF ALL CLAIMS.

WE UNDERSTAND WE ASSUME ALL RISK INHERENT IN HORSE RELATED ACTIVITIES.

WE VOLUNTARILY SIGN OUR NAMES EVIDENCING OUR ACCEPTANCE OF THE ABOVE PROVISIONS.

IN THE EVENT OF THE SIGNATURE OF ONLY ONE PARENT OR GUARDIAN, SUCH PARENT OR GUARDIAN WARRANTS HE/SHE HAS THE AUTHORITY TO BIND BOTH PARENTS AND GUARDIANS WITH HIS/HER SIGNATURE.

Parent & Contestant signatures are required, regardless of age, to process contestant membership application.

PARENT OR LEGAL GUARDIAN _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

PARENT OR LEGAL GUARDIAN _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

CONTESTANT _____ **SIGNATURE** _____ **DATE** _____
 (PLEASE TYPE OR PRINT)

STATE OF _____)
)SS.

COUNTY OF _____)

subscribed and sworn to me before this _____ day of _____, 200____ by _____,

the contestant, _____, and _____, parents or guardians.

My Commission expires: _____