

Secretary.

WAIVER OF LIABILITY



We, the parents or guardians of		(contestant) give the local hospital and the		
physicians on the medical staff permission to admi		• .	•	
participating in the Georgia High School Rodeo A	ssociation	/Georgia Junior High	School Rodeo Associati	on. We
understand each contestant must be covered by m	nedical ins	urance. We hereby rele	ase the hospital, physic	ians on
the medical staff, the rodeo sponsors, and the st	ock contra	actors for all liability. V	Ve also do hereby relea	ase and
discharge the Georgia High School Rodeo Associat	tion/Geor	gia Junior High School	Rodeo Association, its o	officers,
members, or sponsors from any and all claims, der	mands, da	mages, suits, actions or	causes of action which	can be
suffered by said son or daughter while participatin	ng or do he	ereby release our heirs,	executors, and admini	strators
from ever collecting damage from the above ris	ks, and a	ctions or damages as	mentioned above whic	h incur
through or by reason of any matter, thing, condit	ion, negli _{	gence or default, or an	y of them held or giver	n by, or
under the direction of the Georgia High School Roo	deo Assoc	iation/Georgia Junior H	ligh School Rodeo Asso	ciation,
and stock contractors and facility owners and all en	nployees o	or workers of the aforer	nentioned.	
	or			
Father's Signature		Mother's Signature		
Guardian's Signature	Contest	ant's Signature	Date	
Note: This form must be completed in full and sur	rrendered	at the time of check-in	to be eligible to partic	ipate in
any GJHSRA function; this is the responsibility of	f the cont	estant and parents. Fa	ilure to do so disquali	fies the
contestant from any and all GJHSRA privileges.				
Members are insured by: Western Specialty Insur-	ors IIC (laim forms can he obt	ained from Tracey Roa	twright
Western Specialty misure	UIS, LLC. C	Janin Torris Carr De ODE	anned from fracey boar	twingin,

GHSRA State Secretary or Julie Thomas GJHSRA State/Rodeo Secretary, and/or Leisa Haslerig, GHSRA Rodeo