

Dear Student,

We look forward to having you with us for the Buhl, ID Rodeo School, September 14-15, 2019. Our stock contractor will be Billy Clark - Clark Rodeo Ranch, 1020 Burley Ave, Buhl, ID.

From Twin Falls, ID travel west on U.S. Highway 30 approximately 15 miles. Enter Buhl and turn left at the first traffic light which will be Burley Avenue. Travel .02 miles on Burley Avenue to 1020 Burley Avenue. The arena is located on the right side of the road next to Sunset Bowling Alley.

The host motel is the Red Lion Canyon Springs (208) 734-5000 or (800) 733-5466, ask for "Sankey Rodeo School" student rates. Prices include full breakfast. Physical address for motel: 1357 Blue Lakes Blvd. (Interstate 84 exit 173), Twin Falls, ID 83301.

We'll cover a great deal of information with lecture, drills, demonstration, video, etc. I encourage you to do two things: (1) Be on time. Check-In is at 8:00 am, and (2) Bring something to make notes on... and use it. Your extra effort will pay off!

We welcome wives and family members to the school at no cost. Anyone on the grounds who is not family or an enrolled student must be enrolled at least as a Ground School student; Tuition is \$60.00 if enrolled by the enrollment deadline, and includes everything, drills, lectures, lifetime equipment discounts, classroom sessions, etc. except getting on bucking stock. This policy helps us control distractions and was put in place to protect your investment.

Bring any rodeo gear you may have. We'll make sure you have pro quality equipment to use FREE during the school. We will provide everything you need except boots, you must bring your own boots. As a student you will receive lifetime discounts on equipment purchases, starting at the school. CREDIT CARDS may be used for equipment purchases at the rodeo school.

PROOF OF MEDICAL INSURANCE is required for each student except Ground School students. If Ground School students do have insurance and the paperwork it will allow them to do more around the bucking chutes when we buck stock.

## THINGS TO BRING TO THE SCHOOL:

-SIGNED, NOTARIZED RELEASE FORM REGARDLESS OF YOUR AGE!!

-IF YOU'RE UNDER 18, PARENT OR LEGAL GUARDIAN SIGNATURE MUST ALSO BE NOTARIZED ON RELEASE FORM

-IF YOU'RE UNDER 18, CONSENT TO TREAT FORM COMPLETED, SIGNED AND NOTARIZED

I look forward to working with you,

Lyle Sankey - Director of Instruction

RODEO SCHOOL - PARTICIPANT RELEASE FORM

bring signed, completed, notarized form to the school with you

1. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

2. Agreement: As consideration for being allowed to participate and/or train in the SANKEY RODEO SCHOOL the undersigned: NAME\_\_\_\_\_

PHONE ( )\_\_\_\_\_

ADDRESS\_\_\_\_\_

CITY\_\_\_\_\_ STATE\_\_\_\_\_ ZIP\_\_\_\_\_ agrees to the following:

3. Acknowledgement of risk: The undersigned acknowledges that rodeo is a dangerous activity and that the participation in rodeo training exposes the participant to a substantial and serious risk, whether foreseen or unforeseen, including but not limited to property damage, personal injury, and eve death. The undersigned expressly acknowledges that his/her participation in the Sankey Rodeo School will involve such a hazard.

4. Release of sponsors: The undersigned, being fully aware that participation in the Sankey Rodeo school will expose him/her to a substantial and even serious risk of property damage, personal injury or death hereby releases all sponsors, Bill Clark, Clark Rodeo Ranch; Sankey Rodeo Schools and Lyle Sankey, their officers, all class of members, employees, servants and agents, including their heirs and assigns from liability for any and all damage, personal injuries or any other claims arising from the undersigned's participation in the rodeo school including those that are known and unknown, foreseen and unforeseen, past, present, future or contingent.

5. Covenant not to sue: The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against all sponsors, Bill Clark, Clark Rodeo Ranch; Sankey Rodeo Schools and Lyle Sankey, their officers, all class of members, employees, servants and agents, including their heirs and assigns, arising out of, or related to the actions, causes of action, claims and demands hereby waived, released or discharged by the undersigned.

6. Assurances: The undersigned has full power, authority, capacity and right without limitation to execute, deliver and perform this release.

7. Binding effect: This release shall be binding upon the undersigned, the undersigned's spouse, legal representatives, heirs, successors and assigns. This release has been carefully read by the undersigned, and the undersigned fully understands its terms and conditions and has voluntarily executed and delivered this release on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

**MUST BE SIGNED, COMPLETED, AND NOTARIZED REGARDLESS OF AGE.**

Age of Participant: \_\_\_\_\_. Birth date: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_.

I, \_\_\_\_\_, have read the above release in full, fully understand its terms and conditions and I hereby voluntarily execute and deliver this consent to attend and participate in the rodeo school. I further agree to be dully bound by the release's terms and conditions in both my individual capacity and/or in my capacity as parent or legal guardian for rodeo participant.

PARTICIPANT SIGNATURE \_\_\_\_\_

Note: **Participant under 18 years of age must have the following signed by their parent(s) or guardian(s), completed, and notarized.**

Consent of Parent or Legal Guardian \_\_\_\_\_

Public Notary \_\_\_\_\_

Parent/Guardian Consent to Treat

bring signed, completed, and notarized form to the rodeo school with you

As Parent/Legal Guardian I/We give full consent to provide any and all medical treatment as needed in the event of any emergency for my/our child who is under the age of 18.

Parent/Guardian \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Child's Name \_\_\_\_\_

Child's Age \_\_\_\_\_ Child's Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Any Special Medical Concerns \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medicines Being Taken Now \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medical Insurance \_\_\_\_\_

Policy Number \_\_\_\_\_  
\_\_\_\_\_

NOTARY PUBLIC