



**Horseshoe Park**

P.O. Box 1062 | Queen Creek, AZ 85142  
www.FriendsOfHorseshoePark.org

doing business as  
**ROOTS N' BOOTS**  
**Queen Creek**  
More than a rodeo!



## Youth Roughstock Activity Waiver/Release Form – Adult

This waiver is not a participation application, but rather a waiver and release form. In return for the Friends of Horseshoe Park's acceptance of this waiver and their permission to participate in Youth Roughstock (calf, steer and/or bull riding), I or my authorized representative agree to the following terms:

I understand that the movement of the animal itself may also cause injury to the rider, while riding, mounting and being in the chute, dismounting, falling, and once the rider is on the ground they may also become injured by the animal. Further, I understand that contact with the ground itself poses a risk as does the animal. I understand that it is recommended that I use protective gear required by the rodeo association of which I am a member (Arizona High School Rodeo Association or Arizona Junior Rodeo Association) such as gloves, helmet and vests, and that properly fitted these items may mitigate injury, and whether I do so or not is at my own discretion and understand that such gear is not provided by The Friends of Horseshoe Park nor the Town of Queen Creek.

I hereby, for myself, my heirs, executors, administrators and assigns do forever release, waive, and/or discharge any and all rights and claim for damages that may be suffered by me as a result of my preparation for, participation in, and/or traveling to and from the event.

I recognize the risks associated with my participation in the event and specifically agree to indemnify and hold harmless the Town of Queen Creek, Arizona, a municipal corporation, including any members of the governing body of the Town, or any member of any board and/or commission of the Town, and/or any employee of the Town, as well as Friends of Horseshoe Park, and/or any promoter, sponsor, or subcontractor whose facilities and/or services are being used for this event, from any and all injuries, illnesses or damages arising from or associated with my participation in this event. I further certify that I have no COVID symptoms or physical impairment or defect, whether latent or patent, that should preclude my participation in the event.

Participants Name (Please Print):

Age: \_\_\_\_\_ Date of Birth \_\_\_\_\_

### Parental approval NOT required for participants eighteen (18) years or older

I, the adult participant listed above being 18 years or older, do hereby assent to the above waiver/release and agree to all terms as stated above.

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

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

Home Phone ( ) \_\_\_\_\_ Emergency Contact Phone: ( ) \_\_\_\_\_

I am of lawful age and am legally competent and authorized to sign this agreement for and on behalf of myself. Furthermore, I give consent for emergency treatment. The undersigned also agrees and gives the Town of Queen Creek and Friends of Horseshoe Park permission to photograph and/or videotape him/herself and/or his/her child, and that such images may be published at the discretion of Friends of Horseshoe Park, in whatever outlet deemed appropriate to promote or publicize Friends of Horseshoe Park programs.

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date