

BERNICE THIELE MEMORIAL COUNTY RESIDENT TEAM ROPING

HELD ON THE SATURDAY OF FAIR WEEK AT 8:30AM

CHAIRPERSON: Kristin Chambers
 PH: 509.250.0730 EM: chambers5024@gmail.com

ROPING FORMAT: Pick 1/Draw 1

ENTRY FEES: \$38/person \$76/team
 (an individual can enter up to two times)

CHECKS PAYABLE TO: Klickitat County Fair

**MAIL ENTRY FORM, RELEASE FORM AND
 PAYMENT TO:** Bernice Thiele Memorial Team
 Roping, P.O. Box 53, Goldendale, WA 98620

RULES

- Roping Event is open to KLICKITAT COUNTY RESIDENTS only. Participants must have been county residents at least 90 days prior to fair. If participants are college students whose parents are Klickitat County residents, they may participate as county residents the same year following their college graduation. A current local driver's license is used to determine residency. A signed release form is required.
- Standard team roping rules apply.
- Three legal head catches and must be faced and tight for a flag.
- Barrel roping—you must go around the barrel or it will be a no time.
- Pay-off is split two places in the first go-round and two places in the second go-round, paying \$50/man for first and \$25/man for second.
- Average is paid 40-30-20-10 percent if over 25 teams.
- Each team roping two steers will rope a third and final steer.
- Second go will start half the number of teams down the list from start of first go-round.
- One third of the total entry fees is taken out to pay stock charges.
- Western attire must be worn in order to rope. Improper dress will result in a no-time.
- If there is a dispute, a team must present their current driver's license to the pay window to collect their winnings. If the person cannot produce a driver's license that person forfeits winnings and entry fees. Youth participants may use their ASB cards if they do not have a driver's license.
- In case of dispute, a decision is made by a three-person Review Board consisting of Brad Cameron, Mike Thiele and Dale Thiele.

CONTACT INFORMATION:

NAME: _____
 ADDRESS: _____
 EMAIL: _____
 PHONE: _____

ENTRY FORM

TEAM 1: HEADER		HEELER		\$76
TEAM 2: HEADER		HEELER		\$76
TEAM 3: HEADER		HEELER		\$76
TEAM 4: HEADER		HEELER		\$76
TEAM 5: HEADER		HEELER		\$76
TEAM 6: HEADER		HEELER		\$76
TEAM 7: HEADER		HEELER		\$76
TEAM 8: HEADER		HEELER		\$76

TOTAL FEES: _____

FOR OFFICE USE ONLY:

Completed Entry: _____ Signed Release: _____
 Payment Amount \$ _____ Cash Check No. _____ Credit Card
 Date Received: _____ Received by: _____



RELEASE OF LIABILITY – READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Klickitat County Fair & Rodeo program, its related events and activities, I, the undersigned acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the terms and conditions for participation as determined by Klickitat County Fair and Rodeo. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Fair Board immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Klickitat County Fair and Rodeo, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releasees"), FROM ALL LIABILITY TO THE UNDERSIGNED, their personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST they may incur arising out of or related to the EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
6. I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

X _____ AGE: _____ DATE: _____

Participant's Signature

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided about of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided about, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X _____ DATE: _____

Parent's/Guardian's Signature

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