

BRC OFFICIAL CONTESTANT FORM

Bull Riders Canada Inc. Box 515, Irricana, AB T0M 1B0 www.bullriderscanada.ca bullriderscanada@gmail.com

Personnel Membership Application – Season XI Season XI ends immediately following the BRC Finals in 2023

Personnel Membership Application for: Bullfighter (\$	250); Announcer (\$250) _	; Judge (\$125)	
Event Secretary (\$125); Safety Man (\$125)	; Chute Boss (\$125)	; Other* (\$125)	
*If "Other", please explain:			
Company Name (Optional):			
Name:	_ Cell Phone*:* *BRC Office will text important info/updates to this number & publish on BRCs website for Committees looking to hire		
Home Phone:	_Email:		
Address:Box/Street/RR City	Province/State	Postal Code /Zin	
Age: Birthdate: / / / Year			
Membership in Other Associations:	Past Achievements in Sport of	Rodeo:	
New Member? * YesNo Instagram Handle: @_ *Returning BRC Members DO NOT need their form Notar Signature: In signing this Membership Application, you consent to allowing or function for marketing purposes without compensation to you have a second content of the second cont	rized - ng BRC Inc. to use photos and/or vide	os you may appear in from a BRC Even	
Membership Dues : \$250.00 (Cash, Cheque* or eTr *\$45.00 fee will be charged for all NSF Cheques	ransfer)	\$260.00 (Credit Card)	
Please make cheques Payable to: BULL RIDERS CANADA INC. Mail to: Box 515, Irricana, AB TOM 1B0			
Email address for Email Money Transfers (eTransfers	s): bullriderscanada@gmail.co	om	
Credit Card Payment:Yes; if selected, an invo	pice will be emailed to the email	address listed on this form.	
PLEDGE, WAIVER & RELEASE (the folio	<mark>owing 2 pages)</mark> MUST AC	CCOMPANY ALL FORMS!	
For Office Use Only: Card # Issued:	_ Database Updated:	Date:	
Thank you to our Season Partners!			
BUD LIGHT. Nelson HOMES. Read		Cock PREMIUM Wrangle and Event Venue	



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Bull Riders Canada Inc. - Membership Pledge

(please **PRINT NAME CLEARLY** and initial), do hereby accept that my membership to the Bull Riders Canada, Inc. is by invitation only and that my membership may be denied, terminated, suspended, or modified at any time at the discretion of the BRC, Inc. Board of Directors. As a result of this acknowledgment, I agree to conduct myself in a professional manner at all times during my membership with the BRC, Inc. I agree to withhold all bylaws, rules, and codes of conduct of the BRC, Inc. and I swear that the information I have provided to the BRC, Inc. to be both accurate

Bull Riders Canada Inc. - Waiver and Release

_(please **PRINT NAME CLEARLY** and initial), acknowledge that bull riding is an extremely dangerous activity, that participation in and presence at a bull riding venue or event, including but not limited to any events or activities sanctioned, approved by or affiliated with Bull Riders Canada, Inc. (BRC, Inc.) exposes me to serious and substantial hazards and risks of physical injury and/or death and property damage, and that I have been fully warned with regard to all such risks. I realize that the risks are not restricted to only competing but also include being in the arena, behind the chutes, in the livestock holding area, pens and any other area associated with bull riding events, including any area containing pyrotechnics or other fireworks. Being fully aware of the abovementioned risks surrounding participation and presence at bull riding events and in consideration of being accepted as a member of the BRC, Inc. and participating in BRC, Inc. events, I, for and behalf of my heirs, representatives and successors and assigns, unconditionally agree to assume such abovementioned risks and hereby forever discharge, waive, hold harmless and release BRC, Inc. and its subsidiaries, affiliates, officers, directors, shareholders, employees, members, agents, representatives, volunteers, personnel including judges. secretaries, bullfighters, contractors, chute personnel, and all other parties or entities involved in the sanctioning, production, organization, conduct, sponsorship, advertising, and performance of BRC, Inc. events and activities (hereby listed as "releasees") from any and all claims, demands, losses, costs, liabilities and responsibilities arising from or in any way relating to my participation and/or presence at an BRC, Inc. sanctioned, approved, or affiliated event. I agree to waive any claims, demands, losses, costs liabilities or other responsibilities that are known or unknown, seen, or unforeseen, future, or contingent, and whether or not such claims, demands, losses, costs or liabilities arise out of, in whole or in part, by the negligence of the releasees.

_____(please **PRINT NAME CLEARLY** and initial), will not now or at any time in the future, directly or indirectly threaten or prosecute any claim, action, suit, or other proceeding against the releasees arising out of or related to the claims, demands, liabilities and other responsibilities. In consideration of being granted membership and being able to participate in BRC, Inc. sanctioned, approved, related, or affiliated events and activities, I hereby indemnify and shall continue to indemnify and agree to hold harmless BRC, Inc. and all related companies, parent companies, subsidiaries,

Thank you to our Season Partners!



















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affiliates, associates, members, partners, shareholders contractors, and sponsors from any and all claims, liab by any person against BRC, Inc. and all related released person, injury or death arising out of participation in a related events. I,	ilities, actions and costs, as in respect to all injuries my BRC, Inc. sanctioned, a(please PRINT N vementioned provisions a BRC, Inc. and its related irs, representatives, success or membership or related erstand this release and less than the second	asserted, made or threatened s, damages of property or approved, affiliated, or NAME CLEARLY and initial), shall survive the expiration releasees. Application and essors, and assigns. This tionship whether or not I		
Signed:	Date:			
In the event that the APPLICANT IS A MINOR, a part I,	ent or legal guardian muse of parent or guardian P ve-named minor. I have r gree to be bound by the to the above-named minor.	PRINT NAME CLEARLY), read and understand the erms of the Pledge, Waiver I swear the information		
Signature of legal Parent/Guardian:	D	ate:		
Printed Name of legal Parent/Guardian: THIS SECTION BELOW TO BE COMPLETED E OF OATHS - FOR NEW MEMBERS ONLY!				
SUBSCRIBED AND SWORN TO before me this	day of, 2	0 Notary Public		
or Commissioner of Oaths in and for the above written	-	-		
Residing at: My c	ommission expires:			
Typed or Printed Name of Notary:	Signature of Notary:			

Thank you to our Season Partners!













