

YOUR DEPOSIT GUARANTEES YOU A SPOT IN THE SCHOOL

2024 CSI Champions Rodeo School Registration Form

Name: _____

Address/City/State/

Zip: _____

Phone Number: _____ Email Address: _____

Birthday: _____ Age: _____

Mark which event you will be participating in. One event per student per weekend

<u>School</u>	<u>Dates</u>	<u>Instructors</u>
_____ Bull Riding School--\$500 Denton	February 16-18	Justin Andrade & Chad
_____ Bull Fighting School--\$500	February 16-18	Kelly Jennings & Al Sandvoal
_____ Bareback Riding School--\$1,000	February 23-25	Kaycee Feild
_____ Saddle Bronc Riding School--\$500	February 23-25	Jess Martin
_____ Pickup Man School--\$500	February 23-25	Bobby Marriott & J2 Brown

How many head of bucking horses or bulls have you been on? _____

Have you attend any other rodeo schools in the past _____. If so, which schools and when?

You will need all of your own equipment

Health Insurance is required.

Insurance Company _____ Policy Number

Any health problems or previous injuries that need to be considered while attending the rodeo school? If so, please list them: _____

How did you find out about the CSI Champions Rodeo School? _____

All students under the age of 18 (at the time of the school) must have the release signed by a parent or legal guardian and notarized before participation in any CSI CHAMPIONS RODEO SCHOOL event.

All students must have proof of health insurance. Students will not be able to participate if they do not provide a copy of health insurance card.

CSI CHAMPIONS RODEO SCHOOL—RELEASE AGREEMENT

I, the undersigned, fully understand that in the conduct of this event there are numerous circumstances, which could cause personal injury to others and me. Understanding that participation in this event has those risks, I hereby agree to release the College of Southern Idaho, its agents and employees from any and all claims or causes of action, which might arise from this event. I also agree to abide by the rules of the College of Southern Idaho for this event, and permission is granted for the College of Southern Idaho and its affiliates the right to photograph and use my likeness for publicity purposes.

Dated this _____ day of _____, 20____.
(day) (month) (year)

Applicant's Signature: _____

Applicant's Printed Name: _____

Applicant's Address: _____

City/State/

Zip _____

Applicant's Phone Number: _____

** Applicant's Date of Birth: _____

Age Applicant will be at the time of the rodeo school: _____

If Applicant had not reached his or her 18th birthday before the first day of the CSI Champions Rodeo School, a parent's or legal guardian's statement must be signed and **notarized,

We, the undersigned, grant permission to our son or daughter to participate in the above listed event. And in doing so, release the College of Southern Idaho and their assigns or any individual, from responsibility of liability for personal injury, loss or damage to private property incurred by or to the above named participant while taking part in the above named event. It is further agreed that the named applicant will abide by the rules of the College of Southern Idaho during the event. Permission is also granted for the College of Southern Idaho and its affiliates the right to photograph and use his or her likeness for publicity purposes.

Being duly sworn upon oath deposes and says this statement is true.

Parent or Guardian's Signature _____

Subscribed and sworn before me the _____ day of _____, 20____ in

the State of _____, County of _____.

My commission expires _____

Notary Public

Return to: Steven Birnie, CSI Rodeo Team. PO Box 1238. Twin Falls, ID 83303
or email to sbirnie@csi.edu.