



**Mutton Bustin' Rules & Regulations**

- 1) Only a parent or legal guardian may register a child in the Mutton Bustin' Event, and sign a release form and waiver.
- 2) Children must be 4 to 6 years old, and may not exceed 60 lbs.
- 3) Contestants must wear long pants, boots or sturdy shoes (no flip flops or sandals). Long sleeve shirts are recommended.
- 4) Riders will ride during the Bulls, Broncs, Barrels event, on Monday, August 12<sup>th</sup> 2019 at the Turner Co. Fair.
- 5) Children will be provided a bicycle helmet and it **MUST** be worn during ride.  
**NO EXCEPTIONS.**
- 6) Riders will be chosen via a drawing from entries. Only 15 will be allowed to participate. Entry forms must be mail in by August 1<sup>st</sup>, 2019. All registration must be complete along with release of liability and media release.
- 7) Each child will be awarded a trophy after they ride.
- 8) Event happens rain or shine \*\*.

**Mail Entries to:  
Jackie Lukes  
Attn: Mutton Bustin  
27455 453<sup>rd</sup> Ave  
Parker, SD 57053**

**Participant Registration**

Participant Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Sex: M / F Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Rider's Weight (60 lbs or less) \_\_\_\_\_

Primary phone: \_\_\_\_\_

Primary Email: \_\_\_\_\_

## **"Mutton Bustin" RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in the Turner County Fair Mutton Bustin program, related events and activities, the undersigned acknowledges, appreciates and agrees that: 1. The risk of injury from the activities involved in this program is significant, including potential for permanent paralysis and death, and while particular rules, 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 releases or others, and assume full responsibility for my participation; and, 3. I willingly agree to comply with the stated and customary terms and conditions for participation. 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 nearest official immediately; and, 4. I, for myself and on the behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the Turner County Fair Associates, Barnes PRCA Rodeo, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if event ("Releases"), with respect to all and any injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releases or otherwise, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

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SIGNATURE DATE FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER 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 above, of all the Releases, and for myself, my heirs, assigns, and next of kin, I release and agree to Indemnify and hold minor child's involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent permitted by law.

PARTICIPANTS EMERGENCY PHONE NUMBER(S)

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**Media Release**

I hereby authorize the Turner County Fair to photograph me and/or my property, and authorize the Turner County Fair, its legal representatives, or successors and assigns the absolute right and unrestricted permission to copyright, publish and/or use such photographs or recordings in whole or part, or composite or form made for art, advertising, trade or any lawful purpose.

I hereby waive any right that I may have to inspect and approve the finished product or the advertising copy that may be used in connection therewith, or the use to which it is applied. I understand no payment or compensation will be provided to use my photograph or recordings.

I hereby release, discharge and agree to hold harmless the Turner County Fair from any liability by virtue of any use whatsoever, whether intentional or otherwise, that may occur or be produced in the taking of said picture, or in any processing tending toward the completion of the finished product.

**Permission to Treat**

I understand that first aid will be available at the event, that the participant will be supervised closely, and that if a serious illness or injury develops, medical and/or hospital care will be given; however, the staff will not be held responsible in case of accidental illness or injury. I further understand that in case of serious illness or injury we will be notified. If it is impossible to contact us, we give permission of emergency treatment or surgery as recommended by the attending physician. Insurance is the responsibility of the individual.

My signature indicates that I have read this form. I agree to accept the appropriate and logical consequences of my child's actions according to this policy as determined by the Turner County Fair.

Furthermore, I give permission for my child to receive emergency medical attention, and to participate in the Mutton Bustin Competition.

Your signature indicates you accept the Media Release and Permission to Treat paragraphs. If you do NOT accept the Media Release or the Permission to Treat paragraphs, draw a big X across the section you do not accept.

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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