

HIGH COUNTRY RODEO ASSOCIATION

2025 MEMBERSHIP CHECKLIST

NEW MEMBER CHECKLIST:

- MEMBERSHIP FEE
- MEMBER APPLICATION
- SIGNED WAIVER
- SIGNED RULEBOOK ACKNOWLEDGMENT
- COPY OF CURRENT COGGINS
- COPY OF BIRTH CERTIFICATE OR DRIVERS LICENSE

RETURNING MEMBERS:

- MEMBERSHIP FEE
- RENEWAL APPLICATION
- SIGNED WAIVER
- SIGNED RULEBOOK ACKNOWLEDGMENT
- CURRENT COGGINS

Enclose check/money order and mail application to:

HIGH COUNTRY RODEO ASSOCIATION
PO BOX 151
VILAS, NC 28692

OR EMAIL APPLICATION TO:

HIGHCOUNTRYRODEONC@GMAIL.COM

MEMBERSHIPS ARE AVAILABLE THROUGHOUT THE SEASON UP UNTIL THE COMPLETION OF THE 4TH RODEO. THE 4TH RODEO IS SCHEDULED FOR 6/21/25 AND IS THE HALFWAY THROUGH THE SEASON. THIS IS THE MINIMUM NUMBER OF RODEOS REQUIRED TO PARTICIPATE IN FINALS.

HIGH COUNTRY RODEO ASSOCIATION

2025-2026 MEMBER APPLICATION FORM

NAME: _____ DOB: ____/____/____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____

EMAIL: _____

EMERGENCY CONTACT: _____

COMPETING MEMBERSHIPS: PLEASE SELECT ONE, AGE AS OF 1/1/25

PEE WEE (8U) \$100 YOUTH (9-13) \$100 JUNIOR (14-18*) \$100 ADULT (18+) \$100

NON-COMPETING MEMBERSHIPS:

AFFILIATE \$50

AFFILIATE MEMBERSHIPS ARE ONLY NON-COMPETING MEMBERS. IF THE AFFILIATE WISHES TO COMPETE, THEY MAY PAY THE PERMIT FEE AT THE EVENT OR UPGRADE THEIR MEMBERSHIP FOR THE DIFFERENCE IN COST.

MEMBERSHIPS ARE VALID FROM 1/1/2025- 12/31/2025

PLEASE SELECT ALL THAT INTERESTS YOU:

<input type="checkbox"/> CLINICS	<input type="checkbox"/> OPEN ARENA	<input type="checkbox"/> RODEOS	<input type="checkbox"/> JACKPOTS
<input type="checkbox"/> FUNSHOWS	<input type="checkbox"/> SADDLE BRONC	<input type="checkbox"/> RANCH BRONC	<input type="checkbox"/> BAREBACK RIDING
<input type="checkbox"/> MUTTON BUSTIN	<input type="checkbox"/> GOAT TYING	<input type="checkbox"/> BARREL RACING	<input type="checkbox"/> POLE BENDING
<input type="checkbox"/> BREAKAWAY	<input type="checkbox"/> CALF ROPING	<input type="checkbox"/> STEER RIDING	<input type="checkbox"/> CALF RIDING
<input type="checkbox"/> TEAM ROPING	<input type="checkbox"/> CHUTE DOGGIN	<input type="checkbox"/> BULL RIDING	<input type="checkbox"/> OTHER: _____

I, the undersigned, makes an application for membership in the High-Country Rodeo Association (HCRA) and I hereby agree to be bound by and to conduct myself in accordance with the rules established by the HCRA. I agree that I will enter all contests at my own risk, that I will make no claims to the HCRA or to any affiliated individual or organization for injuries, loss, destruction, or theft to me or any of the property in my care. I agree that I and I alone will be responsible for myself and all property for which I bring to the rodeo. I am aware of the risk involved and know that an injury can occur from the participation in the sport of rodeo, for valuable consideration; the receipt of which is hereby acknowledged by all parties, do hereby and forever discharge all the members of the HCRA, producers, stock contractors, sponsors, committees, land owners and lessees of premises from any and all claims, demands, suits, actions, or causes of action which I may, can or shall have reason for any participation in the HCRA.

Signature _____ Date _____

If under 18 years of age, parent or legal guardian must complete the following:

I, _____, the undersigned parent/legal guardian of the above applicant, consent to membership.

Signature _____ Date _____

HIGH COUNTRY RODEO ASSOCIATION

2025 CONTESTANT WAIVER

PARTICIPANT'S NAME: _____ **DOB:** ____/____/____

This form is for all Rodeos, Clinics or Events that are sanctioned by, or part of, the High Country Rodeo Association. Whereas, High Country Rodeo Association (henceforth referred to as HCRA), and/or ANY Arena or facility utilized by HCRA for Rodeos, Clinics or Events has made available to undersigned or to the child of undersigned, or both, all or a portion of the property, equipment and facilities of HCRA and/or Rodeo, Clinic or Event location, including, but not limited to, riding areas, stables, equipment, horses and other livestock, the undersigned hereby assumes full responsibility for the safety of the contestant or participant.

(initials) _____

The term of contestant or participant shall mean not only the undersigned, but also, any minor of the undersigned, and also an person who uses any portion of the property, equipment, horses and other livestock or facilities of HCRA with permission of the undersigned, Undersigned hereby releases, HCRA, their agents, employees, successors, assigns, legal representatives, heirs, executors, administrators, associates, directors, clinicians or facilities they are using from any and all claims, causes of actions, demands, obligations and liabilities, which are now existing or greater mature or accrues at any time, arising out of or related in any fashion to contestant's, participant's or spectator's use of HCRA and/or the facility or arena's property, equipment or facilities, except for HCRA and/or facility or Arena's gross negligence or intentional acts.

(initials) _____

The undersigned acknowledges and fully understands that the contestants and participants use the property, equipment, and facilities of HCRA at his or her own risk. The undersigned hereby agrees to hold and save HCRA and the facility or Arena, Lone Hickory Arena of Yadkinville, their agents' employees, successors, assigns, legal representatives, heirs, executors, clinicians, directors and administrators harmless from each and every claim, demand, liability, or other obligations which may arise out of or be connected in any fashion with loss, injury or damage to the contestant, participant, spectator or the contestant's, participant's, spectators' property. The undersigned hereby agrees and covenants not to bring any action of law or any equity against HCRA and the facility or Arena, Lone Hickory Arena of Yadkinville, their agents' employees, successors, assigns, legal representatives, heirs, executors, clinicians, directors and administrators against any such action brought by contestant, participant, spectator or on behalf of contestant's, participant's, spectator's behalf HCRA, and the facility or Arena, Lone Hickory Arena of Yadkinville, their agents employees, successors, assigns, legal representatives, heirs, executors, clinicians, directors and administrators for anything for which contestant and participant is responsible either alone, jointly or severally. I verify that my child/myself (if over 18) is currently covered by a personal health insurance policy

(initials) _____

Furthermore, the undersigned acknowledges and understands that horseback riding, or other participation in activities such as rough stock events and all other Rodeo events and Clinics at HCRA, and the Arena or facility may involve the propensity of the animal to behave in ways that may result in injury, harm, or death to persons on or around them, including but not limited to biting, kicking, rearing, stamping and stumbling; the unpredictability of the animal's reaction to such things as sounds, sudden movement and unfamiliar objects, persons, or other animals; certain hazards such as surface and subsurface conditions; collisions with other animals or objects; and the potential of competitor, participant, spectator, including the undersigned an their minor children to act in a negligent manner that may contribute to injury to contestant, participant, spectators or others, such as failing to maintain control over the animal or not acting with his or her ability.

(initials) _____

I understand that rodeo, rodeo clinics and rodeo events are dangerous to participants, contestants and spectators. I understand this! I still give my minor child or myself permission to participate and i take full responsibility for injury or death that may occur by participating or allowing my child to participate!

(initials) _____

In the event that contestant or participant or any of the designated individuals is a minor, the undersigned on behalf of said minor, does here by consent to any x-rays, anesthetic, medical or surgical diagnosis to treatment and hospital services that may be rendered to said minor under the general of specific instructions of any physician or hospital. The undersigned acknowledges that this consent to medical treatment is given in advances of any specific diagnosis or treatment which may be required, but is given in the to encourage High Country Rodeo Association and/or the Arena or Facility, any hospital staff and physicians to exercise their best judgment as to the requirements of such diagnosis or treatment. The undersigned derby agrees to pay all fees and expenses of doctors, hospital, ambulances and other medical expenses reasonably and necessarily incurred. The undersigned states that they have current health or accident insurance on contestant/participant. We are not responsible for any theft or damage to vehicles or trailers at any time.

(initials) _____

READ CAREFULLY BEFORE YOU SIGN. This document releases High Country Rodeo Association and Lone Hickory Arena of Yadkinville from any liability resulting the use of the High Country Rodeo Association and Lone Hickory Arena of Yadkinville arena, property, equipment or facilities. Under North Carolina, an equine activity sponsor or equine professional is not liable for any injury to or the death of a participant in equine activities. Pursuant to chapter 99e article 1 of equine liability activity.

(initials) _____

Simple Language:

The sport of rodeo is dangerous. Every event has the possibility to cause injury or death. I understand that I, my child or legal ward could be seriously injury or die by participating. It is with this understanding that I agree that I, as a participant, parent or legal guardian are completely responsible for any injury or death. I, as a participant, parent or legal guardian WILL NOT hold anyone but myself responsible or liable for injury or death at any High Country Rodeo Association and Lone Hickory Arena of Yadkinville rodeo, clinic, event or function.

CONTESTANT SIGNATURE OR LEGAL GUARDIAN IF UNDER 18 YEARS OF AGE:

DATE: _____

HIGH COUNTRY RODEO ASSOCIATION

PARTICIPANT'S NAME: _____ DOB: ____/____/____

I acknowledge that I have had access to the 2025 High Country Rodeo Association (HCRA) Rule Book. I may print the rule book from the HCRA website at www.highcountryrodeo.com. I AGREE that I have read and understand all the contents of the rule book. I will act in accordance with these policies and procedures as being a registered member or contestant of the High Country Rodeo Association.

I understand that if I have questions or concerns at any time about the rule book, I may take my concerns to the board via email at highcountryrodeonc@gmail.com.

By signing the agreement, I acknowledge that these rules will be enforced at the discretion of the board. I understand that they are for my protection and for the protection of my child and any guests.

Signature _____

Date _____

If under 18 years of age, parent or legal guardian must complete the following:

I, _____, the undersigned parent/legal guardian of the above applicant, consent to membership.

Signature _____

Date _____