

SEBRA Inc. Bull Riding School Application & Release

Please Print Legibly. This application must be filled out completely & signed by both the student & parent(s) and faxed to (336) 431-2826 or mailed to SEBRA 6111 Canter Road Archdale, NC 27263.

Date: _____ Telephone# (____) _____

Name: _____ Cell Phone# (____) _____

Address _____ City _____ ST _____ Zip _____

Email Address _____ Birth Date _____ Age _____

Waiver & Release

By making application to attend and participate in the SEBRA, Inc Bull Riding School the applicant agrees to participate in the SEBRA Bull Riding school at Applicant's own risk. Applicant hereby releases and discharges SEBRA, Inc., Jeff Canter, Chan Canter, Gary Miller, American Legion Post 290 and its directors, officers, representatives, employees, stock contractors, producers and agents from liability, loss, claims, damages and expenses for injuries to person, property, reputation or financial condition as a result of or in any way relating to Applicant's participation., whether caused by negligence, by arena or facility conditions. Applicant knows and agrees that by his application on this form he/she completely releases SEBRA, Inc., Jeff Canter, Chan Canter, Gary Miller, American Legion Post 290 and its directors, officers, representatives, employees and agents from any liability, including negligence. Applicant voluntarily chooses to participate in the SEBRA Bull Riding school and freely and willingly consents to same.

Application must be notarized if applicant is less than 18 yrs of age & signed by parent or guardian.

Unscribed to and sworn this _____ Day of _____ 2010

My Commission Expires: _____

Notary Public Signature: _____

*Applicant Signature: _____ Date: _____

*Parent Signature (If Under 18) X _____