

COVID-19 SDHSRA
(Please Print Clearly or Type and fill in all blanks)

Member's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone #: _____ DOB: Month _____ Day _____ Year _____

COVID-19 RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

In consideration of the above-named member ("Member") being allowed to participate and compete in the 2020 Regional Qualifying Rodeos and the South Dakota High School Finals Rodeo, we, the Member, and the undersigned parent(s) or legal guardian of the Member, on behalf of the Member, and for ourselves, our personal representatives, heirs, spouse, parents, siblings, and children, do hereby:

1. RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the South Dakota High School Rodeo Association, Inc., Buffalo and Dupree Regional Rodeos, any other rodeo association, any rodeo committee, any stock contractor, any rodeo or event sponsors and the Regional Rodeo and Stanley County Fairgrounds, and each of them and their officers, directors, trustees, managers, agents and employees (all of whom are collectively referred to herein as "Releasees") from any and all liability to the Member, the undersigned, and their personal representatives, assigns, heirs, parents, legal guardians, siblings, and children, and any claims or demands therefore, on account of the Member's or the undersigned's injury, illness, disease or death from the COVID-19 coronavirus, which occurs as a result of the Member's or any of the undersigned's entrance onto the grounds of the Regional Qualifying Rodeo Grounds, Stanley County Fairgrounds and/or participation as a contestant, assistant, official or otherwise in any rodeo event, whether such injury, sickness, disease or death is caused by the negligence or other wrongful conduct of, strict liability or otherwise by, one or more of the Releasees or any contestants, spectators or other individuals at the Stanley County Fairgrounds.er.
2. AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS THE RELEASEES and each of them from any liability, damage or loss (including, but not limited to, attorneys' fees and other defense costs) one or more of them may suffer or incur arising out of or related to the Member's or any of the undersigned's entry onto the Regional Qualifying Rodeo Grounds, grounds of Stanley County Fairgrounds and/or participation in any rodeo events, whether such claim is based on one or more of the Releasees' negligence, breach of contract or warranty, strict liability or other legal theory.
3. UNDERSTAND that Member's and the undersigned's entry onto the grounds of the Regional Qualifying Rodeo Grounds, the Stanley County Fairgrounds and/or participation in rodeo events during the COVID-19 pandemic contains DANGER AND RISK OF ILLNESS, DISEASE, INJURY OR DEATH TO MEMBER and the undersigned, that COVID-19 is highly contagious, and that there is INHERENT DANGER in COVID-19 which the Member and each of the undersigned appreciate and voluntarily assume because we choose to do so. WE EACH VOLUNTARILY ELECT TO ASSUME AND ACCEPT ALL RISKS inherent in COVID-19.
4. We each agree to comply with all federal, state and local laws and regulations and all security policies and procedures of the Regional Rodeo Grounds, the Stanley County Fairgrounds and the Buffalo and Dupree Regional Rodeo, SDHSRA, NHSRA relating to COVID-19. We each understand that the Member may be denied entrance to the Stanley County Fairgrounds and not allowed to participate or continue to participate in the rodeo based on medical check-in requirements and continuing medical requirements during the duration of the rodeo. The undersigned agree that in the event any portion of this document is held to be invalid, the balance shall, notwithstanding, continue in full legal force and effect to the greatest extent possible under applicable law. The parents or guardian of the Member agree that by signing below they are in addition to binding themselves, binding the Member to the maximum extent permitted by applicable law.

WE HAVE READ THIS RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE, AND INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY APPLICABLE LAW.

Signature of Natural Father

Print Clearly or Type Name of Natural Father

Signature of Natural Mother

Print Clearly or Type Name of Natural Mother

Signature of Legal Guardian

Print Clearly or Type Name of Legal Guardian

Signature of Member

Print Clearly or Type Name of Member

*Both parents or legal guardian and member must sign this form in the appropriate places above. If only one parent is signing, please note reason on signature line. For example, DECEASED, DIVORCED AND FULL CUSTODY, ETC. Please return original Release form to the state/province secretary prior to or upon registration. The member MAY NOT compete if the release is not properly signed and turned in.