



SOUTHEAST LITTLE BRITCHES RODEO ASSOCIATION, INC.

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RELEASE AND WAIVER OF LIABILITY

Southeast Little Britches Rodeo Association, Inc. (SELBRA) Contestants Full Legal Name:

(First, middle, last name)

Parent(s)/Guardian(s) Release of Liability

Southeast Little Britches Rodeo Association, Inc. and any of their associates are released from all liability when attending and/or participating in any events associated with SELBRA.

I/We, _____, the parent(s) or legal guardian(s) of the above-named child, do hereby give permission for him/her to participate in the 2024-2025 SELBRA rodeo season/series/jackpot series.

HOLD HARMLESS AND EXCLUSION OF LIABILITY

I/we acknowledge that all horseback-riding/rodeo events/jackpot events that we participate in are considered contact sports for which I/we assume all liability for personal injuries, death and property damage that arises there from. Further I am/we are aware of the Equine Liability Law under Florida Statute 773.01: **Florida – Warning – Under Florida law, an equine sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.** and agree not to hold the Southeast Little Britches Rodeo Association, Inc. and its owners, operators, members, officers, directors, and agents liable for any injury, death to my myself, others, or to my animals arising from either their negligence, my negligence, or the negligent conduct of anyone causing me, my family members and/or my animals any injury, death, or damages.

Father's/Legal Guardian's Signature Date

Mother's/Legal Guardian's Signature Date

Year-End Awards Requirements Acknowledgement

I/We, _____, the parent(s) or legal guardian(s) of the above named child, do hereby acknowledge that I/we are aware of the SELBRA year-end award requirements as stated in SELBRA ground rules.

Father's/Legal Guardian's Signature Date

Mother's/Legal Guardian's Signature Date

State of _____ County of _____ Subscribed and sworn to me this
_____ day of _____ 20__ by _____ Witness by my hand
and official seal. My commission expires. _____

Notary Signature: _____

OFFICIAL SEAL: