

CANADIAN SENIOR PRO RODEO ASSOCIATION
Membership Application

Name _____ Telephone # _____

Address: _____

_____ email: _____
City Province/State Postal Code/Zip

Age _____ Sex _____ Birthdate _____
Month Day
Year

Memberships in other Associations _____

Events participating in _____

I do hereby release, acquit and forever discharge the **CANADIAN SENIOR PRO RODEO ASSOCIATION** and all rodeos approved by same, including all **PRODUCERS and RODEO COMMITTEES** from all claims, demands and causes whatsoever, arising from and growing out of any personal injuries or damage sustained by me, or to my property, by virtue of any participation as a contestant or worker, in any certain rodeo, approved by the **CANADIAN SENIOR PRO RODEO ASSOCIATION**, as well as any and all claims, demands, and causes of action of whatsoever kind or character, which I, or my heirs, executors, or administrators, now have or may hereafter have cause against the **CANADIAN SENIOR PRO RODEO ASSOCIATION** approved rodeos.

I have read and fully understand the meaning and effect of this release, and do hereby agree.

Contestant's Signature

DECLARATION OF AGE: Please state which age category you wish your points to be counted toward. _____

PROOF of AGE: A photocopy of either your driver's license or birth certificate must accompany this application,

REMIT TO: Canadian Senior Pro Rodeo Association
Tracy Bowers
Box 286
Ardmore, Alberta T0A 0B0 Phone: 780-826-5955

Membership Dues: \$155.00

Please make cheques or money order payable to **CANADIAN SENIOR PRO RODEO ASSOCIATION**

Visa / MC # _____ Exp. Date. _____
(please circle one) **Visa & Master Card** – a 5% charge will apply on all credit card payments

For Office Use Only:

Card # Issued: _____

Date: _____