

Park County Livestock Committee
PO Box 1215
Bailey, CO 80421

I, _____, have read the rules for the Park County 4-H Catch-An-Animal contest carefully, understand and agree to abide by these rules. If any rules are not adhered to, I may be required to forfeit the animal to the Livestock Committee.

I have discussed the contest with my parents/guardians, and they have agreed to allow me to participate in the contest. I have a facility to properly care for the animal should I be successful. I understand the time and financial commitment on the part of my family.

I will be a resident of Park County and will be enrolled in 4-H for the coming year (2015-2016)

Contestant name: _____

Date of Birth: _____ Years in 4-H _____

Mailing Address: _____

Physical Address _____

Home Phone: _____ Cell Phone _____

Email Address(s): _____

If participating in the Catch-A-Calf contest, prior large animal project(s) _____

4H Member Signature: _____

Signed by Parent/Guardian _____

Date

The contestant will participate in the following Catch-An-Animal Project:

Beef _____ Lamb _____ Swine _____

Permission for Youth to Participate in Park County 4-H Catch-An-animal Event

READ THIS DOCUMENT COMPLETELY BEFORE SIGNING, ITS EFFECT IS TO REALIZE COLORADO STATE UNIVERSITY, ITS GOVERNING BOARD, PARK COUNTY, ITS GOVERNING BOARD, THE FAIR BOARD AND THE PARK COUNTY LIVESTOCK COMMITTEE, INC., AND THE STATE OF COLORADO FROM ANY LIABILITY RESULTING FROM YOUR PARTICIPATION IN THE ACTIVITIES DESCRIBED BELOW, AND TO WAIVE ALL CLAIMS FOR DAMAGES OR LOSSES AGAINST THE SAID ORGANIZATIONS WHICH MAY ARISE FROM SUCH ACTIVITIES EVEN IF THEY RESULT FROM NEGLIGENCE.

RELEASE FROM RESPONSIBILITY, ASSUMPTION OF RISK AND WAIVER

Location of Activity: Park County Fairgrounds

Date of Activity: Sunday, July 17, 2016

Description of Activities: Catch-An-Animal

I, the undersigned participant, exercising my own free choice to participate voluntarily in the activity described above, and promising to take due care during such participation, hereby acknowledge that I have been informed of the nature of the activity and that I am aware of the hazards and risks which may be associated with my participation in the above-named activity, including the risk of bodily injury, death or damage to property which may occur from known or unknown causes. I understand, accept, and assume all such hazards and risks and waive all claims against the state of Colorado, the Board of Governors of the Colorado State University System, and the Colorado State University, Park County, Park County Fair Board and other persons as set forth above. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage sustained through my participation in normal or unusual acts associated with the above-named activities, regardless of whose fault may be the cause of my injuries or damages, **EVEN IF CAUSED BY CARELESSNESS OR NEGLIGENCE**, so long as the conduct which caused the injuries or damages was not grossly negligent or willful and wanton.

Further, I indemnify and hold harmless the Board of Governors of the Colorado State University System and Colorado State University, Park County, Park County Fair Board, Park County Livestock Committee, Inc., and their members, officers, agents, employees, and any other persons or entities acting on their behalf and the successors and assigns for any and all of the aforementioned persons and entities, against any and all claims, demands, and causes of action whatsoever, whether presently known or unknown, of any person who suffers any injury, disability, death or other harm, to person or property or both, as a result of my participation in and/or presence at the above-listed activity.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily give my consent and agree to this Release from Responsibility, Assumption of Risk, and Waiver.

*I, (printed name) _____, am the parent or legal guardian of the Participant. I have read and I understand the provisions of this document, I consent to the participant taking part in the activities described above, and I fully enter into and agree to the above Release from Responsibility, Assumption of Risk, and Waiver as authorized pursuant to C.R.S. section 13-22-107.

Participant's Name _____ Date of Birth _____

Signature of Parent or Legal Guardian

Read, Understood and Agreed to on this (date)