



VENTURA COUNTY FAIR EXCA "COWBOY CLASSIC"

Event Date: August 10, 2017 • Triple Point Race (1 Run) • Multiple Division Entries Permitted

Rider Name: _____ EXCA Member #: _____

Address: _____

City / State / Zip: _____

Telephone: (_____) _____ Email: _____

Horse Name: _____ Breed: _____

DIVISIONS (CIRCLE THOSE THAT APPLY):

YOUNG GUNS (7-12yrs) NOVICE INTERMEDIATE YOUTH NON-PRO RIDE SMART (55+) PRO

ENTRY FEE PER DIVISION: \$75 (Includes EXCA fee & Grounds fee)

of Divisions Entered _____ X \$75 = \$ _____

Pre-Entry Information: (Entries close: August 1, 2017 Limited to 25 entries)

Checks Payable to: "BILL CAMERON "

Entry form and payment should be mailed to: c/o Cameron Ranch, PO Box 1212, Rosamond, CA 93560

Or emailed to NaturalBornRacers@gmail.com Host Contact: Bill Cameron/Evon Kurtz (661) 350-6577

Required Forms:

- EXCA Release of Liability
- Ventura County Fairgrounds Release of Liability
- Bill Cameron International Horsemanship Release of Liability



EXCA Membership required to compete (see attached membership form):
Green Horn: \$35 (30-day trial) Youth/Young Gun: \$45 Individual: \$65 Family: \$105

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____ (“Participant”), acknowledge that I have voluntarily applied to participate in the following activities at 31st District Agricultural Association, Ventura County Fair:

(Description of activities, which Participant will engage in)

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: _____
Parent or Guardian’s initials (if under 18): _____

As consideration for being permitted by the Fair, the State of California, and the County of Ventura, and any lessor of the fair premises (“Lessor”), to participate in these activities and use the Fair premises and facilities, **I forever release the Fair, the State, the County, the Lessor, any fair affiliated organization, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively “Releasees”) from any and all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have. Or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities.** I also agree that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BEWTEEN MYSELF AND THE FAIR, THE STATE, THE COUNTY, THE RENTER, AND THE LESSOR, AND SIGN IT OF MY OWN FREE WILL.

If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.

Executed at _____, California on _____, 20__.

PARTICPANT/RELEASOR

PARENT OR GUADRIAN

Signature

Signature

Address: _____

Address: _____

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.

Bill Cameron International Horsemanship NaturalBornRacers Waiver & Release of Liability

In order to ride with Bill Cameron, you must read this completely and agree to all of its contents. If not, you will not be allowed to participate at any of our functions. THIS IS A CONTRACT. Please read the entire release before signing. Parents must sign if they have children under the age of 18 attending any of our functions. Please initial next to each paragraph that you have read and agreed to its contents and sign your full legal name at the bottom. You understand it is your responsibility to know the club rules!

_____ In consideration of my permission to participate in Natural Born Racers™ Events, I expressly agree and contract on behalf of myself, my heirs, executors, administrators, successors and assigns, that Bill Cameron, NaturalBornRacers™, and its staff, officers, directors, representatives, agents, arena owners, organizers, sponsors, and co-sanctioned affiliated entities (hereinafter "NBR"), shall not be liable for any damages arising from personal injuries (including death) sustained by me or damage to property, as a result of my participation in NBR, regardless of whether such injuries result, in whole or in part, from the negligence of NBR.

_____ By the execution of this Agreement, I accept and assume full responsibility for any and all injuries, damages (both economic and non-economic), and losses of any type, which may occur to me, whether foreseen or unforeseen, and I hereby fully and forever release and discharge NBR, its staff, officers, directors, representatives, agents, and affiliated entities, from any and all claims, demands, damages, rights of action, causes of action, or costs, present or future, whether the same be known or unknown, anticipated, or unanticipated, whether under tort or other civil liability, resulting from or arising out of my participation in NBR Events.

_____ I expressly agree to indemnify and hold NBR harmless against any and all claims, demands, damages, rights of action, or causes of action, of any person or entity, that may arise from injuries or damages sustained by me.

_____ I agree to be solely responsible for my safety and well-being. I understand that NBR does not provide supervision, instruction or assistance relative to my participation in NBR Events at all times.

_____ I agree that NBR has the right to call 911 in the event of a serious injury to myself.

_____ I agree that NBR has the right to call a veterinarian and/or animal removal on my behalf in the event of a serious injury to my horse or a horse under my supervision.

_____ I acknowledge that I should wear an equestrian safety helmet when riding in the event. I also understand that under California Law, any rider under the age of 18 years must wear a helmet when riding.

_____ **I HEREBY EXPRESSLY ASSUME ALL RISK OF HARM** to which I, and those minors accompanying me, may be exposed while observing on the premises and/or participating in NBR Events.

_____ **Finally, I agree to the taking of photographs, videotaping and audio recording of me and those minors under my control; and, to the uncompensated use by the NBR Events and Bill Cameron or their assigns.**

_____ I understand that participation in the activities of NBR Events involves inherent risk of serious injury, including permanent disability or death. I further understand that such risks include, but are not limited to, the following:

1. The propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine;
2. The unpredictability of an equine's reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals;
3. Hazards, including, but not limited to, surface or subsurface conditions;
4. A collision with another equine, another animal, a person, or an object;
5. The potential of an equine activity participant to act in a negligent manner that may contribute to injury, death, or loss to the person of the participant or to other persons, including, but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant.

I HAVE READ THE FOREGOING WAIVER AND RELEASE OF LIABILITY AND VOLUNTARILY EXECUTED THIS DOCUMENT WITH FULL KNOWLEDGE OF ITS CONTENT.

Signature of Rider (or parent if youth is under 18)

Print Name (& relationship if applicable)

Date

E-mail Address: _____

EMERGENCY CONTACT & PHONE NUMBER _____



Membership Application (fill out one application for each family member)

Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Email: _____

Date of Birth (required) _____

Sex (circle one) Male Female

Check one Membership Type:

_____ Life Time Membership \$650

_____ Individual Membership \$65

_____ Family Membership \$105

_____ Youth or Young Gun Membership \$45

_____ Greenhorn Membership \$35 (*good for 30 days*)

_____ Associate Membership \$25 (*Non competitor*)

Check one Division:

_____ Young Gun 7 - 11

_____ Youth 12 & Over

_____ Novice

_____ Intermediate

_____ Non Pro 12 & Over

_____ Ride Smart 55 & Over

_____ Pro 12 & Over

Send check to:

EXCA

PO Box 50

Bluff Dale, TX 76433

**RELEASE OF LIABILITY OF THE EXTREME COWBOY ASSOCIATION AND
CRAIG CAMERON, ET AL, INDEMNITY AGREEMENT OF OBSERVERS AND
PARTICIPANTS, AND, WAIVER OF COMPENSATION FOR VIDEO AND/OR
RECORDING AND PHOTOGRAPHY**

I, the undersigned, acting individually and on behalf of all minor children accompanying me, as consideration for the privilege of observing and/or participating in the activities of the **EXTREME COWBOY ASSOCIATION**, including all events on the premises, **DO HEREBY AGREE TO RELEASE AND HOLD HARMLESS EXTREME COWBOY ASSOCIATION, CRAIG CAMERON**, and their respective owners, officers, agents, sponsors, representatives, employees and volunteers, from liability for negligent and grossly negligent acts or hazardous conditions including the uncontrolled acts of other guests, participants, and livestock. I acknowledge and fully understand there are known and unknown risks, hazards and dangers associated with equine events, natural hazards, and other hazardous activities being conducted on the premises, and **I HEREBY EXPRESSLY ASSUME ALL RISKS AND HEREBY KNOWINGLY RELEASE EXTREME COWBOY ASSOCIATION, CRAIG CAMERON**, and their respective owners, officers, agents, sponsors, representatives, employees and volunteers, from any and all claims of negligence and gross negligence. **I AGREE TO INDEMNIFY AND HOLD HARMLESS EXTREME COWBOY ASSOCIATION, CRAIG CAMERON**, and their respective owners, officers, agents, sponsors, representatives, employees, and volunteers, from any and all claims, demands, causes of action and damages, whether or not caused by their negligence or gross negligence. **I HEREBY EXPRESSLY ASSUME ALL RISK OF HARM** to which I, and those minors accompanying me, may be exposed while observing on the premises and/or participating in Extreme Cowboy Association events.

Finally, I agree to the taking of photographs, videotaping and audio recording of me and those minors under my control; and, to the uncompensated use by the Extreme Cowboy Association and Craig Cameron or their assigns.

EXECUTED this _____ day of _____, 20____, to be effective hereafter.

Participant _____ Observer _____(check one)

Print Name: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____

Signature: _____

Guardian Signature: _____