4 STATES YOUTH RODEO ASSOCIATION 2023 – 2024

Rodeo Season is upon us and 4SYRA is happy to be back for the second year. Our first year back after many years off was a success, and we are looking forward to an even better year this year.

Attached is a membership form along with entry form. At each rodeo you MUST complete your entry form for the next rodeo and place it along with PAYMENT in the entry box. Checks will be deposited the week of that rodeo. You must fill out an entry form for each rodeo. I will take call in entries for Non-Members the Monday before each rodeo.

Our first rodeo is August 5th at Rusk County Youth Expo in Henderson, Texas. We have 10 rodeos plus a makeup date scheduled this season plus a 2-day finals. Rodeo start time is 10:00AM.

These forms MUST be postmarked by July 14th. You will also need to send a copy of your birth certificate. If you have more than one contestant, you can combine fees onto one check but please note that in the Memo section.

Thank you! Can't wait to see everyone! If you have ANY questions, please contact either myself (903) 987-9246 or Katy (903) 987-2837!!!

4SYRA Mimi C Barker PO Box 1721 Kilgore, TX 75663 (903) 987- 9246 Four States Youth Rodeo Association Membership Application / Medical Release 2023 - 2024

MEMBERSHIP DUES: \$100

CHECK AGE GROUP: (copy of birth certificate required)

8 and under (max. age as of 8/1/20023) DOB 9 - 11 (max. age 11 as of 8/1/2023) DOB 12 - 14 (max. age 14 as of 8/1/2023) DOB 15 - 19 (max. age 19 as of 8/1/2023) DOB				
NAME:				
ADDRESS:				
CELL PHONE:	CELL PHONE:			
EMAIL:				

MEDICAL RELEASE / ACKNOWLEDGEMENT

I hereby agree to release the Four States Youth Rodeo Association, any member or officer, any producer, club or organization or any individual member of the Four States Youth Rodeo Association from responsibility in case of any accident or injury to my son/daughter_______ during the 2023-2024 rodeo year and release all of the above from any theft, loss, or damage that may occur during a rodeo sanctioned by the 4SYRA. I hereby grant and authorize permission for my son/daughter to be transported to a hospital and given treatment by any doctor, hospital of personnel of either and hereby release said doctor, hospital and personnel for transporting contestant to hospital and administering necessary treatment if any. I further acknowledge that there is a NO TOLERANCE policy on alcohol and illegal drugs use on rodeo grounds. Failure to comply with this policy will result in the disqualification of contestant.

Contestant:	Parent/Legal Guardian:					
Sworn and subscribed to me in my Notary Public	in my presence thisday of		, 20 in and			for
		County/Parish	for	the	State	of
Complete, Notarize and return to:	Mimi C. Barker PO Box 1721 Kilgore, TX 7566 903-987-9246	3				

4 STATES YOUTH RODEO ASSOCIATION MINORS RELEASE

Member's Name	Phone Age	
Address	Effective Date	

We, the undersigned, hereby request that the below named minor be granted permission (1) to enter the restricted area. (2) to participate as a contestant, assistant, official or otherwise in rodeo events, (3) to compete for money, prizes, recognition or reward, (4) to be covered by participants' hospitalization insurance, if applicable, as limited by the master policy (all collectively hereinafter called "permissive entry").

In consideration of "permissive entry" to minor into the restricted area, which is the area from which admission to the general public is restricted, which includes, but is not limited to the rodeo arena, competition area, chutes, pens, adjacent walkways, concessions, and other appurtenances, we, the undersigned, on behalf of the minor and for ourselves, our personal representatives, heirs, next of kin, spouses, and assigns, do hereby:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the rodeo committee, stock contractor, rodeo association, sponsors, arena operators or owner, and each of them, their officers, agents and employees (all hereinafter collectively referred to as "releasee") from any and all claims and liability arising out of strict liability or ordinary negligence of releasee or any other participant which causes the undersigned injury, death, damages or property damage. We, the undersigned, jointly, severally, and in common, convenant to hold releasee harmless and to indemnify releasee from any claim, judgment or expenses releasee may incur arising out of any of the minor's activities or presence in the restricted area.

2. UNDERSTAND that minor's entry into the restricted area and/or participation in rodeo events contains DANGER AND RISK OF INJURY OR DEATH TO MINOR, that conditions of the rodeo arena change from time to time and may become more hazardous, that rodeo animals are dangerous and unpredictable, and that there is INHERENT DANGER in rodeo which we each appreciate and voluntary assume because the minor and we choose to do so. Each of the undersigned has observed events of the type that the minor seeks to participate in. We further understand that the arena surface, access ways or lack thereof, lighting or lack thereof, and weather conditions all change and pose a danger to the minor, but nevertheless. WE EACH VOLUNTARILY ELECT TO ACCEPT ALL RISKS CONNECTED with the minor's entry into the restricted area and/or participation in any rodeo events.

3. AGREE that this agreement shall apply to any incident, injury, accident or death occurring on the above date and FOR A PERIOD) OF ONE (1) YEAR THEREAFTER or until the minor's association membership expires, whichever shall last occur. All subsequent agreements and release documents signed by any of the undersigned shall amplify, but shall in no way limit the provisions of this document. The provisions of this document may be canceled by any one of the undersigned by delivering to the above rodeo association written cancellation of this agreement which shall be effective 24 hours after the date said cancellation is actually received by the rodeo association.

4. Releaser or parents or guardians of the undersigned minor AGREE TO INDEMNIFY the Releasee and each of them from any loss, liability, damage or costs they may incur due to the presence or participation of the minor in the described activities whether caused by the negligence of the Releasee or otherwise.

WARNING: Under Texas Law (Chapter 87. Civil Practice and Remedies Code) an Equine Professional is not liable for an injury to or death of a participant in equine activities resulting from the inherent risks of equine activities.

WE HAVE READ THIS DOCUMENT. WE UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. WE APPRECIATE AND ASSUME ALL RISKS INHERENT IN RODEO.

Signature of Natural Father

Signature of Guardian

Signature of Natural Mother

Signature of Member

On this _____ day of ______, 20___, before me. personally appeared _______ to me known to be the persons who executed the foregoing Release and acknowledged that they signed same as their free act and deed.

My commission expires:

Notary Public

4 States Youth Rodeo Association Entry Form 2023 - 2024

Circle which Rodeo you are entering: 1 2 3 4 5 6 7 8 9 10 11

Contestant Name:

		<u>15 - 19 (Girls)</u>				15 - 19 (Boys)	
		Bending	\$45			Chute Dogging	\$50
		el Racing	\$45 \$45			_ Chute Dogging Breakaway	\$50 \$50
						 Tie Down	\$50 \$50
			\$50 ¢50			_	
		kaway 	\$50 ¢50			Ribbon Roping	\$50
		on Roping	\$50				
		<u>12 - 14 (Girls)</u>				<u> 12 - 14 (Boys)</u>	
		Bending (girls)	\$45			Boys Goat Tying	\$50
		el Racing (girls)	\$45			Boys Breakaway	\$50
		Goat Tying	\$50			 Tie Down (co-ed)	\$50
		Breakaway	\$50			Chute Dogging	\$50
		Ribbon Roping	\$50			Boy Ribbon Roping	\$50
			<i><i></i><i></i></i>				÷÷÷
	<u>8 & l</u>	Under (CO-ED)				<u>9 - 11 (co-ed)</u>	
	Pole	Bending	\$45			Pole Bending	\$45
	Barre	el Racing	\$45			Barrel Racing	\$45
	Goat	Tying	\$50			 Goat Tying	\$50
	Brea	kaway	\$50			Breakaway	\$50
						Ribbon Roping	\$50
						Double Mugging	\$50
						_	
				am Roping (Bo	ys & Girls)		
	Head	ler	\$50			Header	\$50
	Heele	er	\$50			Heeler	\$50
Partner/Draw				Partner/Draw			
	Check if partne	r is adult			Check if	partner is adult	
	•		4 and under	Team Roping		•	
	Head		\$50		(– Header	\$50
	Heele		, \$50			– Heeler	\$50
Partner/Draw			,	Partner/Draw		_	
r ar thery braw				i artifely braw			
	Check if partne	r is adult				partner is adult	
				Total Entry Fees:			<u></u>
				Office Charge			\$15
					\$10/Family		\$10
				Non Member			\$25
				Total Due:	4SYRA		

NOTE: Entry forms for next rodeo are to be completed and put in the entry box with payment!!! Call-ins (or text) are Monday before each rodeo 6 - 9 PM (Mimi) 903.987.9246 ► Go to www.irs.gov/FormW9 for instructions and the latest information.

Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

	2 Business name/disregarded entity name, if different from above	
Print or type. Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only following seven boxes. Individual/sole proprietor or single-member LLC	one of the ust/estate 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): ust/estate Exempt payee code (if any)
	 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Dull if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member is disregarded from the owner should check the appropriate box for the tax classification of its owner. Other (see instructions) ► 	the LLC is code (if any)
See Sp e	5 Address (number, street, and apt. or suite no.) See instructions. Reque	ster's name and address (optional)
Par	7 List account number(s) here (optional) Taxpaver Identification Number (TIN)	
- C I		

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Social security number			
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>				
TIN, later.	or			
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and	Employer identification number			
Number To Give the Requester for guidelines on whose number to enter.				
Part II Certification				

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign	Signature of		
Here	U.S. person		

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)

Date <

- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest),
- 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.