

Elite Professional Bull Riders, LLC.

PO Box 17735 Missoula, MT 59808

CONTRACTOR CA CC CK CARD SENT______ 2018

OFFICE USE ONLY

2019 CONTRACTOR MEMBERSHIP APPLICATION

(fill out front & back)
MEMBERSHIP FEE \$100

Application Date: _				Coat Size:	Shirt Size:
Business Name:					
(ple	ase fill out busir	ness name exactly how yo	ou would like it ar	nounced/listed in publi	cations)
Address					
Street		City	State	Zip	
Phones:				Email:	
Home	Cell	Work			
PRIMARY PER	SONNEL (i	.e. Owner, Manag	ger)		
Name:		Rela	tionship to Bus	siness:	
Phones:				Email:	
Home	Cell	Work			
ASSISTANT CO	NTRACTO	OR PERSONNEL	(i.e. Flankm	an. Driver)	
		Kei	-		
					E mail :
Home	Cell	Work			
		this membership app deos in which I may			and its assignees permission to re:).
Signature:					
Return application alo	ong with a \$10	0.00 check or money o EPB office at 888-776	order to the addr		located on the back of this form. y pay via credit card by filling in the
		4692 Montros Website: ww	se Dr. Missoula, ww.eliteprobullri tary@eliteprobu	ders.com	
Credit Card Paymer	nt (\$105 incl.	\$5 Processing Fee):	Visa Mas	sterCard AME	X: Billing Zip Code:
Card Number:			Expiration:	_/ Security C	Code/CVN (3 or 4 digits):
Name on Card:		Cardholder Signature:			

Elite Professional Bullriders, LLC. Membership Pledge

<u>Membe</u>	ership Pledge
	se print name clearly and initial), do hereby accept that my
	ation only and that my membership may be denied, terminated, Board of Directors. As a result of this acknowledgment, I agree to nembership with the EPB. I agree to adhere to all bylaws, rules and
codes of conduct of the EPB and I swear that the information I ha	
Elita Duafassia	ad Dullwidous III C
	nal Bullriders, LLC. rand Release
	se print name clearly and initial), acknowledge that bull riding is an
extremely dangerous activity, that participation in and presence a or activities sanctioned, approved by or affiliated with Elite Profesubstantial hazards and risks of physical injury and/or death and such risks. I realize that the risks are not restricted to only compelivestock holding area, pens and any other area associated with be fireworks. Being fully aware of the abovementioned risks surrou consideration of being accepted as a member of the EPB, LLC. a representatives and successors and assigns, unconditionally agree waive, hold harmless and release EPB, LLC. and its subsidiaries, agents, representatives, volunteers, personnel including judges, separties or entities involved in the sanctioning, production, organiz LLC. events and activities (hereby listed as "releases") from any arising from or in any way relating to my participation and/or presentations.	at a bullriding venue or event, including but not limited to any events essional Bullriders, LLC. (EPB, LLC.) exposes me to serious and property damage, and that I have been fully warned with regard to all eting but also including being in the arena, behind the chutes, in the ull riding events, including any area containing pyrotechnics or other anding participation and presence at bull riding events and in and participating in EPB, LLC. events, I, for and behalf of my heirs, et to assume such abovementioned risks and hereby forever discharge, affiliates, officers, directors, shareholders, employees, members, ecretaries, bullfighters, contractors, chute personnel, and all other zation, conduct, sponsorship, advertising, and performance of EPB, and all claims, demands, losses, costs, liabilities and responsibilities esence at an EPB, LLC. sanctioned, approved, or affiliated event. I her responsibilities that are known or unknown, seen, or unforeseen,
directly or indirectly threaten or prosecute any claim, action, suit the claims, demands, liabilities and other responsibilities. In con in EPB, LLC. sanctioned, approved, related or affiliated events at agree to hold harmless EPB, LLC. and all related companies, pare shareholders, officers, directors, employees, agents, officials, concosts, asserted, made or threatened by any person against EPB, L property or person, injury or death arising out of participation in a [,	any EPB, LLC. sanctioned, approved, affiliated or related events. ame clearly and initial) understand the undertakings and covenants termination of any membership or relationship with EPB, LLC. and
**	
assigns. This release shall be valid and applicable to all future per year or season. I have carefully read and understand this release to the matters released and waived herein.	and have been advised to seek legal counsel and advice pertaining
Signed: Printed Name:	Date:
In the event that applicant is a <u>minor</u> , a parent or legal guardian I,	nust fill out the following: in the presence of a Notary:
(name of parent or guardian) affirm that I am the parent or legal understand the above stated Pledge, Waiver and Release and here and Release both personally and as a representative of the above EPB, LLC. by the above-named minor is true to the best of my ks SUBSCRIBED AND SWORN TO before me this day of, 20	by agree to be bound by the terms of the Pledge, Waiver named minor. I swear the information provided to the
	My commission expires:

Notary/Commissioner of Oath

__ Typed or Printed Name of