

Elite Professional Bull Riders, LLC.

PO Box 17735 Missoula, MT 59808

Permit

CA CC CK

CARD SENT ___

2018

OFFICE USE ONLY

ONE TIME PERMIT APPLICATION

(fill out front & back)

EVENT PERMIT COST IS \$50.00 PER PERSON — ONE-TIME USE ONLY!

Legal Name:			
First Midd	lle Last	1	Nickname
Address:PO Box/Street			
PO Box/Street	City	State/Province	Zip/Postal Code
Home Phone:	*EPB will t	Cell Filolle	tes to this number
Birth Date: /	/ SS# :	Em	ail:
	•		B, LLC. office before Permit will be granted
	O Contestants will be	issued an Event Permit i	if under 16 years of age.
100 MOSI HAVE IV	OTORIZED PARENT		are under the age of 18 – NO EXCEPTIONS
PERMIT DETAILS		TAL CONSENT if you a	
PERMIT DETAILS	OTORIZED PARENT Event Date:/	TAL CONSENT if you a	
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PERMIT DETAILS I	Event Date:/_ EPB Event Name & Loc	TAL CONSENT if you a/ cation:	are under the age of 18 – <i>NO EXCEPTIONS</i>
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Please fill out the application completely, read and fill out the pledge, waiver, and release located on the back of this form. Return application along with a \$50.00 check or money order to the address below, or you may pay via credit card by calling the EPB office at 888-776-5609.

Elite Professional Bullriders 4692 Montrose Dr., Missoula, MT 59808 Website: www.eliteprobullriders.com Email: secretary@eliteprobullriders.com

**PLEASE MAKE CHECKS AND MONEY ORDER TO: ELITE PROFESSIONAL BULLRIDERS, LLC **

Elite Professional Bullriders, LLC. Membership Pledge

<u>Memb</u>	<u>ership Pledge</u>
I,(ple	ase print name clearly and initial), do hereby accept that my
membership to the Elite Professional Bullriders, LLC. is by invisuspended, or modified at any time at the discretion of the EPB conduct myself in a professional manner at all times during my and codes of conduct of the EPB and I swear that the information	Board of Directors. As a result of this acknowledgment, I agree to membership with the EPB. I agree to adhere to all bylaws, rules
	nal Bullriders, LLC. r and Release
	ase print name clearly and initial), acknowledge that bull riding is an
extremely dangerous activity, that participation in and presence or activities sanctioned, approved by or affiliated with Elite Prof substantial hazards and risks of physical injury and/or death and such risks. I realize that the risks are not restricted to only comp livestock holding area, pens and any other area associated with befireworks. Being fully aware of the abovementioned risks surroconsideration of being accepted as a member of the EPB, LLC, representatives and successors and assigns, unconditionally agree waive, hold harmless and release EPB, LLC, and its subsidiaries agents, representatives, volunteers, personnel including judges, so parties or entities involved in the sanctioning, production, organ LLC, events and activities (hereby listed as "releases") from any arising from or in any way relating to my participation and/or presented.	at a bullriding venue or event, including but not limited to any events ressional Bullriders, LLC. (EPB, LLC.) exposes me to serious and a property damage, and that I have been fully warned with regard to all property damage, and that I have been fully warned with regard to all property damage, and that I have been fully warned with regard to all property damage, and that I have been fully warned with regard to all property damage, and presence at bull riding events, in the bull riding events, including any area containing pyrotechnics or other unding participation and presence at bull riding events and in and participating in EPB, LLC. events, I, for and behalf of my heirs, we to assume such abovementioned risks and hereby forever discharge, a affiliates, officers, directors, shareholders, employees, members, excretaries, bullfighters, contractors, chute personnel, and all other ization, conduct, sponsorship, advertising, and performance of EPB, and all claims, demands, losses, costs, liabilities and responsibilities resence at an EPB, LLC. sanctioned, approved, or affiliated event. I ther responsibilities that are known or unknown, seen, or unforeseen,
	t name clearly and initial) will not now or at any time in the future,
directly or indirectly threaten or prosecute any claim, action, sui the claims, demands, liabilities and other responsibilities. In coin EPB, LLC sanctioned, approved, related or affiliated events a agree to hold harmless EPB, LLC. and all related companies, par shareholders, officers, directors, employees, agents, officials, co costs, asserted, made or threatened by any person against EPB, I property or person, injury or death arising out of participation in I, (please print I)	t or other proceeding against the releases arising out of or related to insideration of being granted membership and being able to participate and activities, I hereby indemnify and shall continue to indemnify and rent companies, subsidiaries, affiliates, associates, members, partners, intractors and sponsors from any and all claims, liabilities, actions and LLC and all related releases in respect to all injuries, damages of any EPB, LLC. sanctioned, approved, affiliated or related events.
its related releases. Application and membership of EPB, LLC. assigns. This release shall be valid and applicable to all future p	termination of any membership or relationship with EPB, LLC. and is binding upon me and all heirs, representatives, successors and periods or membership or relationship whether or not I sign each and have been advised to seek legal counsel and advice pertaining
Signed: Printed Name:	Date:
In the event that applicant is a minor , a parent or legal guardian	
I, (name of parent of the above-named minor. I have read and understand the above be bound by the terms of the Pledge, Waiver and Release both p minor. I swear the information provided to the EPB, LLC. by the	or guardian) affirm that I am the parent or legal guardian re stated Pledge, Waiver and Release and hereby agree to ersonally and as a representative of the above named
SUBSCRIBED AND SWORN TO before me this day	
of, 20	Notary/Commissioner of Oath Residing at
	My commission expires:

Notary/Commissioner of Oath

_____ Typed or Printed Name of