

Elite Professional Bull Riders, LLC.

PO Box 17735 Missoula, MT 59808

BULLRIDER MEMBERSHIP

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

Bullriders: ID Verification (Proof of Age) MUST be sent to the EPB office before membership will be granted YOU MUST HAVE NOTORIZED PARENTAL CONSENT if you are under the age of 18-NO EXCEPTIONS! MUST BE AT LEAST 16 YEARS OF AGE READ YOUR RULEBOOKS KNOW YOUR RULES!

Please Print						
Legal Name:	Middle	Last	Nickname			
Address:						
PO Box/Street	City		e/Province	Zip/Posta	Code	
Home Phone:			Cell Phone	**EPP will toxt impo	tant event info/updates to this num	hor.
Email:				"EPB WIII (ext Impor	tant event imo/ updates to this numi	Jer
Birth Date:/	/	SS#:		Coat Size:	Shirt Size:	
Emergency Contact						
Name:						
Phones:				Email:		_
Address:						
Photo/Video Release: to publish photos and		-			on I am granting EPB, LLC perr	nission
Signature:					Date:	
PLEDGE	, WAIVER	& RELEAS	E MUST ACCO	MPANY ALL FORM		
	with a \$100	.00 check or	money order to t		ase located on the back of this for you may pay via credit card by filling	
		4692 Web	site: <u>www.elitep</u> ı	ssoula, MT 59808		
Credit Card Payment (\$105 incl. \$	5 Processin	g Fee): Visa	_ MasterCard Al	ИЕХ: Billing Zip Code:	
Card Number:			Expiration:	/ Security	Code/CVN (3 or 4 digits):	
Name on Card		Cardholder Signature:				

Elite Professional Bullriders, LLC.

<u>Memb</u>	<u>ership Pledge</u>
I,(ple	ease print name clearly and initial), do hereby accept that my
membership to the Elite Professional Bullriders, LLC. is by invi	tation only and that my membership may be denied, terminated,
	Board of Directors. As a result of this acknowledgment, I agree to
	membership with the EPB. I agree to adhere to all rules and codes
of conduct of the EPB and I swear that the information I have p	rovided to the EPB to be both accurate and true.
Flita Professio	onal Bullriders, LLC.
	r and Release
	ase print name clearly and initial), acknowledge that bull riding is an
	at a bull riding venue or event, Including but not limited to any events
	fessional Bullriders, LLC. (EPB, LLC.) exposes me to serious and
substantial hazards and risks of physical injury and/or death and	l property damage, and that I have been fully warned with regard to all
	beting but also include being in the arena, behind the chutes, in the
	bull riding events, including any area containing pyrotechnics or other
fireworks. Being fully aware of the above-mentioned risks surr	
	and participating in EPB, LLC. events, I, for and behalf of my heirs,
	ee to assume such abovementioned risks and hereby forever discharge,
	s, affiliates, officers, directors, shareholders, employees, members, secretaries, bullfighters, contractors, chute personnel, and all other
	secretaries, burninghiers, confidencies, charles personner, and an other sization, conduct, sponsorship, advertising, and performance of EPB,
	y and all claims, demands, losses, costs, liabilities and responsibilities
	resence at an EPB, LLC. sanctioned, approved, or affiliated event. I
	other responsibilities that are known or unknown, seen, or unforeseen,
future or contingent, and whether or not such claims, demands,	losses, costs or liabilities arise out of, in whole or in part, by the
negligence of the release.	
	at name clearly and initial) will not now or at any time in the future,
	it or other proceeding against the releases arising out of or related to
	nsideration of being granted membership and being able to participate
	and activities, I hereby indemnify and shall continue to indemnify and
	arent companies, subsidiaries, affiliates, associates, members, partners,
	ontractors 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.
	name clearly and initial) understand the undertakings and covenants
	r termination of any membership or relationship with EPB, LLC. and
	is binding upon me and all heirs, representatives, successors and
assigns. This release shall be valid and applicable to all future p	periods or membership or relationship whether or not I sign each
	e and have been advised to seek legal counsel and advice pertaining
to the matters released and waived herein.	
Signed: Printed Name: Printed Name:	Date:
In the event that applicant is a minor , a parent or legal guardian	• • •
I, (name of parent or	guardian) affirm that I am the parent or legal guardian of
the above named minor. I have read and understand the above s	
bound by the terms of the Pledge, Waiver and Release both pers	
I swear the information provided to the EPB, LLC. by the above	e-named fillior is true to the best of my knowledge.
CLIDCODIDED AND GWODN TO L. f 41.	
SUBSCRIBED AND SWORN TO before me this day of, 20	Notary/Commissioner of Oath
01, 20	Residing at
	My commission expires:
	My commission expires: Typed or Printed Name of
	Notary/Commissioner of Oath

Notary/Commissioner of Oath