## Texas Youth Ranch Rodeo Association P.O. Box 20 Fairfield, Texas 75840

## **SUBSTITUTE FORM**

Last Name:	First Name:		Middle Initial		
Address:	City/State/Zip:				
Phone:	Birthdate:	Birthdate: Age as of Jan. 1st, 201¾7			
Phone 2:	Emergency Contact (Name):				
Email:	Emergency Cor	Emergency Contact (Number):			
Social Security # (for 1099)					
Name of member you are subbing	for:				
Team Name:		Division:			
				6 and Under	
Did the member prepay?	yes	no		10 and Under	
If no, Total Paid	cash/shock#			te 13 and Under 18 and Under	
	casii/ciieck #		_ Sr. Giris Senior	18 and Under	
with the rodeo, individually or collectively re loss sustained or suffered while a participan Parent's Signature:	t in the Texas Youth Ra	nch Rodeo Ásso		lamage or 	
We/I, the undersigned, do hereby grant and rele	_			=	
members, officers, members or licensees, to mak minor child that are obtained in connection with	•		= -	=	
Association activities. We/I authorize the Texas R and/or electronically.		-			
We/I agree that the Texas Youth Ranch Rodeo As above-identified member for any lawful purpose. Web content. The use of said photographic or vioparty for any manner of unlawful or unauthorize Association.	, including but not limited deo images either in print	I to publicity, illus , electronically or	tration, advertising, as Web Content by	and Web any third	
Parent's Signature:					
The birth certificate will be checked by the Birth Certificate Checked					
You are responsible for keeping an upda	ted coggins on hand	at every rodeo			