



P.O. Box 699 - Weyburn, SK - S4H 2K9
(P) 306.842.4052 - (F) 306.842.1469
weyburnagsociety@hotmail.com
www.weyburnagriculturalsociety.com



The Weyburn Agricultural Society Smoker Cook Liability Waiver

THE WEYBURN AGRICULTURAL SOCIETY RESERVES THE RIGHT TO MAKE ADDITIONAL REGULATIONS AS THE SITUATION WARRANTS. ALL JUDGE DECISIONS ARE FINAL.

VIOLATIONS OF THE RULES AND REGULATIONS OF THE CONTEST MAY RESULT IN DISQUALIFICATION.

Contestant Name: _____ Date: _____

Phone Number: _____ Email: _____

Address: _____

City: _____ Province: _____ Postal Code _____



P.O. Box 699 - Weyburn, SK - S4H 2K9
(P) 306.842.4052 - (F) 306.842.1469
weyburnagsociety@hotmail.com
www.weyburnagriculturalsociety.com



The Weyburn Agricultural Society Smoker Cook off Liability Waiver Cont.

I hereby acknowledge that I am voluntarily participating in The Weyburn Agricultural Societies Smoker Cook off. I hereby assume full responsibility for all liability and all risk of injury or loss, including death, which may result from the participation in this event. I hereby hold harmless, release, waive, forever discharge and covenant not to bring legal action or claims or demands I may have by reason of any accident, illness, injury or death, or damage to, loss or destruction of any property, arising or resulting directly or indirectly from my participation in the event and occurring during such participation. This general release and waiver of liability of all claims is binding on my heirs, executors, administrators and family members and any and all persons pursuing a claim on my behalf, on behalf of my estate or against me or my estate.

By signing below, you are agreeing that you understand and agree to all terms in the waiver. All team members and minors' parents must sign this document in order to be considered for The Weyburn Agricultural Society Smoker Cook Off.

1. Print Name: _____

Signature: _____

Date: _____

2. Print Name: _____

Signature: _____

Date: _____

3. Print Name: _____

Signature: _____

Date: _____

Signature: _____

Date: _____