



## 2021 ARA Minor Release Form

1015 Hickory St  
Perryville, AR 72126  
Phone (501)607-4100  
[ararodeo@gmail.com](mailto:ararodeo@gmail.com)

Minor Contestant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

I, the undersigned, hereby agree to release from liability the Arkansas Rodeo Association, any stock contractor, producer or rodeo committee for any injury or loss of personal property regarding the above-named minor contestant. My signature on this document indicates that I acknowledge the minor contestant's participation in rodeo events could be dangerous and agree to assume all risks inherent in rodeo.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission Expires \_\_\_\_/\_\_\_\_/\_\_\_\_

*Notary  
Seal Here*