



## NCYRA Membership Application Due by March 9, 2026

I, \_\_\_\_\_, make an application for membership in the North Carolina Youth Rodeo Association (hereinafter called NCYRA). I understand upon my applications acceptance and the payment of the membership fee I will be entitled to the following:

- To compete in all approved NCYRA rodeos
- To be notified of all NCYRA rodeos and dates (Facebook/Website)
- A record of all performances in the 2026 season.
- To gain points towards year end awards
- Membership is only valid for the 2026 season
- The age limit for membership is 19 years old as of January 1, 2026
- 1 Free guest admission per contestant

I agree that I will enter all performances at my own risk and adhere to all the rules for my protection. I will make no claims to the NCYRA or any other individual for injuries, loss, destruction, or theft to me or any of the property in my care. I agree that I and I alone will be responsible for myself and all property for which I bring to rodeos.

Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If under 18, Parent/ Guardian's Signature: \_\_\_\_\_

Date \_\_\_\_\_

### Member Information

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

SSN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Parent/ Guardian Contact Information:

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Emergency Contacts

1-Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2-Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

3-Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_



# NCYRA Rule Book Acknowledgement Form

I, \_\_\_\_\_ acknowledge that I have had access and read the North Carolina Youth Rodeo Association (NCYRA) Rule Book. I may print the rule book out from the NCYRA website at [www.NCYRA.com](http://www.NCYRA.com) or request a paper copy from the rodeo secretary. I AGREE that I have read and understand all the contents of the rule book. I will act in accordance with these policies and procedures as being a registered member or contestant of said association.

I understand that if I have questions or concerns at any time about the rule book I may take my concerns to any board member.

*By signing the agreement, I acknowledge that these rules will be enforced at the discretion of the board. I understand that they are for my protection and for the protection of my child and any guests.*

Contestant Signature:

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Date:

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Parent(s)/ Guardian(s) Signature:

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Date:

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## NCYRA Release and Waiver of Liability and Assumptions of Risk Agreement

Covered Events- All North Carolina Youth Rodeo Association Rodeos,  
Sanctioned Events, Practices, and other Fundraising events.

**This Waiver is effective as of March 1, 2026 until December 31, 2026**

In consideration for being permitted to participate in these events, I, for myself or on behalf of the participant, as the participants parent or legal guardian, acknowledge and voluntarily agree to the following.

**Please initial each one:**

\_\_\_ I understand the potential risks of participation in these events and that I am releasing the event holders, sponsors, venues, or employees from any liability related thereto. Working with live animals is inherently unpredictable and potentially dangerous. Reactions to strange sounds, surroundings, different handlers, and sudden movements cannot always be anticipated or controlled. The handling of animals by other participants cannot always be anticipated, not controlled by the event holders, sponsors, venues, or employees. Thus, there are always inherent risks to participation.

\_\_\_ Assumption of Risk: I fully understand that participation in these events may not only involve risk of serious injury or death, economic loss, property damage, or loss that may result from the participants own actions, inactions, or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event is being conducted, and the participant and parent/guardian voluntarily agrees to assume risk.

\_\_\_ Covenant Not to Sue: The participant and their parents/ guardians / guests personal and legal representatives, heirs, successors, and next of kin will not make any claim against NCYRA or any if its present or former officials, employees, agents, attorneys, insurers, representatives and their respective successors, heirs, and assigns or any volunteers, for injury, damage, death, or any other loss arising from or related to participation in the NCYRA events.

\_\_\_ Release: The participants and their parents/ guardians/ guests personal and legal representatives, heirs, successors, and next of kin, forever release, waive, discharge, and relinquish NCYRA and its insurer from any and all actions, causes of action, claims, charges, demands, losses, damages, costs, attorneys fees, judgements, liens, indebtedness, and liabilities of every kind and character, whether known or unknown, including foreseen or unforeseen bodily injuries, personal injuries, and property damage that may be sustained by the participant and their parent/ guardian in any way connected to, related to, or arising out of participation in these events regardless of any negligence.

\_\_\_ Good Health: The participant is in good health and has no physical condition that would prevent him/her from participating in these events or that would increase the risk of serious injury or death in the event of an accident. I have had the opportunity to seek medical advice for any concerns I may have had regarding the participant.

\_\_\_ Statutory Limitations on Liability: (1) I understand that under North Carolina law, equine professional or equine activity sponsors are not liable for injury due to death of participant in equine activities resulting from the inherent risk of equine activities, pursuant to section Chapter 99E of the North Carolina General Statutes.

(2) I understand that under North Carolina law, a farm animal activity sponsor or farm animal professional is not liable for an injury to or death of a participant in farm animal activities resulting exclusively from the inherent risks of farm animal activities. Chapter 99E

\_\_\_ I AGREE that this Agreement shall apply to any incident, injury, accident, or death occurring on the above date and for a period of 1 year thereafter. All subsequent agreements and release documents signed by any of the undersigned shall simplify but shall in no way limit the provisions of this document. The provisions of this document may be canceled by any one of the undersigned by delivering to the above association written cancellation of this agreement, which shall be effective 24 hours after the date said cancellation is received by the association director.

\_\_\_ I have carefully read this Agreement and fully understand its contents. I am aware that I have given up substantial rights of the

participant and their parents/ guardians/ guests by signing this Agreement, and I am signing the Agreement voluntarily. There is no obligation to participate in these events, but I desire to do so or to allow such participation. I certify that I am at least 18 years of age and the participant, or that I am the legal parent/ guardian of the participant.

Contestant(s) Name:

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Date:

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Print Name of Participant, Volunteer, Worker, Parent/Guardian:

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Signature if over 18 years old:

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Signature of Parent/Guardian if under 18 years old:

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Print Name of Parent/ Guardian Signing:

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## Notary

The State of North Carolina, county of \_\_\_\_\_,

I, \_\_\_\_\_ Notary Public, do hereby certify that \_\_\_\_\_ (name of individual(s) whose acknowledgement if being taken) personally appeared before me this

day and acknowledged the due execution of the

foregoing instrument. Witness my hand and official seal this \_\_\_\_ day of

\_\_\_\_\_, 2026.

Notary Public Signature: \_\_\_\_\_

Print: \_\_\_\_\_

My commission expires \_\_\_\_\_ (Seal)



## 2026 NCYRA Photo/ Media Release Form

North Carolina Youth Rodeo Association PO Box 183, Mebane, NC 27302

Permission to Use: Photograph/ Video/ Media

Contestant Name:

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Location: All NCYRA Rodeos, Events, Fundraisers

I grant to the North Carolina Youth Rodeo Association, its representatives and employees, the right to take photographs and/or videos of me, my child, and my property in connection with the above identified subject. I authorize the North Carolina Youth Rodeo Association, its assignees and transferees to copyright, use, and publish the same in print and/or electronically.

I agree that North Carolina Youth Rodeo Association may use such photography/ videos of me with or without my name and for any lawful purpose, including for example purposes such as publicity, illustration, advertising, and web content.

I also understand that no royalty fee or other compensation shall become payable to me by reason of such use.

Please initial the preferred line below:

\_\_\_\_\_ I AGREE to the terms of the North Carolina Youth Rodeo Association Photo Release Policy.

\_\_\_\_\_ I DISAGREE to the terms of the North Carolina Youth Rodeo Association Photo Release Policy. I understand that my child's photo/ video will **not be used**.

Parent/Guardian's Signature:

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## NCYRA Code of Conduct

This code of conduct is in place for any contestant, parent, member of the board, family member, volunteer, a person associated with a stock contractor and/ or a product, and will include but it is not limited to the following:

- Absolutely **NO** display of unsportsmanlike behavior
- **NO** consuming alcoholic beverages nor the use of any illegal substances (including marijuana)
- **NO** unbecoming language; including swearing, belittling, and harassing
- **NO** bullying
- **NO** littering

In the case of a violation, the NCYRA Board of Directors may impose:

First Step: a warning will be issued

Second Step: \$100 fine will be imposed and possibly a disqualification for current rodeo

Third Step: membership will be indefinitely suspended, time frame determined by the Board at the next scheduled meeting

The disciplinary actions will be progressive however the Board reserves the right to combine or skip steps depending on the facts of each situation and the nature of the offense. In addition, a contestant may also be subject to disqualification should a parent, guardian, or family member disrespect the code of conduct. Any violations should be reported to the Board for resolution. Any complaints or concerns about the decisions the Board of Directors has made should be made directly to the NCYRA Board of Directors only. Any public complaints or negative discussion made through social media or otherwise will also make contestants, parents, guardians, and family members, or others associated, subject to disciplinary action stated above.

The decision of the NCYRA Board of Directors' is final.

This form must be signed and returned to the rodeo secretary before a contestant will be allowed to compete.

Member Name

Print:

Signature:

Date:

Parent/Guardian Name:

Print:

Signature:

Date:

Parent/Guardian Name:

Print:

Signature:

Date:



## NCYRA MEDICAL RELEASE FORM 2026

### CONSENT TO TREAT MINOR CHILDREN/ ADULTS:

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_, do hereby consent to any medical care determined by the medical staff on site to be necessary for the welfare of my child, myself, or my guests, while said child is participating in a NCYRA event, or I am working, or volunteering in said event. IF I am not reasonably available by telephone, or in a conscious state of mind, to give consent at the time. This authorization is effective from March 1, 2026 to December 31, 2026.

Signature:0

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Parent/ Legal Guardian Signature if under 18:

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Print Name:

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This consent form should be taken with the child, or person, to the hospital or physician's office when the child is taken for treatment. This additional information will assist in treatment if it can be furnished with the consent but is not required.

Family Address:

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Parent/Guardian Telephone:

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Parent/Guardian Telephone:

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Last Tetanus:

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Allergies to drugs or foods:

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Special Medications:

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Blood Type or Pertinent Information:

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Child's Physician:

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Phone:

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Insurance:

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Policy #:

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Preferred Hospital:

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# Liability Release For Parent/Guardian of Participant

## NCYRA Release and Waiver of Liability and Assumptions of Risk Agreement

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\_\_\_ Assumption of Risk: I fully understand that participation in these events may not only involve risk of serious injury or death, economic loss, property damage, or loss that may result from the participants own actions, inactions, or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event is being conducted, and the participant and parent/guardian voluntarily agrees to assume risk.

\_\_\_ Covenant Not to Sue: The participant and their parents/ guardians / guests personal and legal representatives, heirs, successors, and next of kin will not make any claim against NCYRA or any if its present or former officials, employees, agents, attorneys, insurers, representatives and their respective successors, heirs, and assigns or any volunteers, for injury, damage, death, or any other loss arising from or related to participation in the NCYRA events.

\_\_\_ Release: The participants and their parents/ guardians/ guests personal and legal representatives, heirs, successors, and next of kin, forever release, waive, discharge, and relinquish NCYRA and its insurer from any and all actions, causes of action, claims, charges, demands, losses, damages, costs, attorneys fees, judgements, liens, indebtedness, and liabilities of every kind and character, whether known or unknown, including foreseen or unforeseen bodily injuries, personal injuries, and property damage that may be sustained by the participant and their parent/ guardian in any way connected to, related to, or arising out of participation in these events regardless of any negligence.

\_\_\_ Good Health: The participant is in good health and has no physical condition that would prevent him/her from participating in these events or that would increase the risk of serious injury or death in the event of an accident. I have had the opportunity to seek medical advice for any concerns I may have had regarding the participant.

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\_\_\_ I have carefully read this Agreement and fully understand its contents. I am aware that I have given up substantial rights of the participant and their parents/ guardians/ guests by signing this Agreement, and I am signing the Agreement voluntarily. There is no obligation to participate in these events, but I desire to do so or to allow such participation. I certify that I am at least 18 years of age and the participant, or that I am the legal parent/ guardian of the participant.

CONTESTANT(s) NAME:

\_\_\_\_\_

Date:

\_\_\_\_\_

Print Name of Participant, Volunteer, Worker, Parent/Guardian:

\_\_\_\_\_

Signature if over 18 years old:

\_\_\_\_\_

Signature of Parent/Guardian if under 18 years old:

\_\_\_\_\_

Print Name of Parent/ Guardian Signing:

\_\_\_\_\_

## Notary

The State of North Carolina, county of \_\_\_\_\_, I,

\_\_\_\_\_ Notary Public, do hereby certify that \_\_\_\_\_ (name of

individual(s) whose acknowledgement if being taken) personally appeared before me this

day and acknowledged the due execution of the

foregoing instrument. Witness my hand and official seal this \_\_\_\_ day of \_\_\_\_\_, 2026.

Notary Public Signature: \_\_\_\_\_

Print: \_\_\_\_\_

My commission expires \_\_\_\_\_

(Seal)



## Membership Packet Checklist

- Membership Application
- Rulebook Acknowledgement Form
- NCYRA Release & Waiver of Liability & Assumption Of Risk Agreement
- Photo/Media Release Form
- Code of Conduct Form
- NCYRA Medical Release Form 2026
- Liability Release For Parent/Guardian of Participant
- Completed W-9 Form
- Copy of Birth Certificate

Membership packet needs to be emailed to [ncyrayouthrodeo@gmail.com](mailto:ncyrayouthrodeo@gmail.com)  
or mailed to NCYRA P.O. Box 183 Mebane, NC 27302

Membership payments can be made at:

[NCYRA 2026 Membership Square Link](#)

OR Check-In at the first Rodeo

Mailed to NCYRA P.O. Box 183 Mebane, NC 27302

(Please send an email notifying us that you are mailing the membership fee  
to [ncyrayouthrodeo@gmail.com](mailto:ncyrayouthrodeo@gmail.com))