



## **CANADIAN PROFESSIONAL RODEO ASSOCIATION**

### **2010 FULL MEMBERSHIP APPLICATION**

The dues for a **Resident Full Membership** are **\$429.45** (Canadian Funds) and must be renewed yearly. (\$414 + \$15.45 GST)

The dues for **Non Resident Full Membership** are **\$436.80** (Canadian Funds) and must be renewed yearly. (\$421 + \$15.80 GST)

A new membership will not be issued until a **NOTARIZED Application Form, Declaration of Eligibility** and **Member History Form** have been filed with the C.P.R.A. office and payment is received in full. **In the case of a minor, both parents or the legal guardian(s) must sign the application and it must be so indicated before it is notarized. We do require proof of legal guardianship and sole custody.**

All memberships must be ***purchased two business days prior*** to an entry opening date before an entry will be accepted for a rodeo.

All full members will receive Life and Dismemberment insurance through the C.P.R.A.'s Insurance policy. A summary of the terms of the policy will be forwarded to you with your membership card.

Each regular member will receive a year subscription to the Canadian Rodeo News.

***Memberships Cards can be purchased ONLY from the Canadian Professional Rodeo Association office at 272245 RR 2, Airdrie AB, T4A 2L5. Phone (403) 945-0903, Fax (403) 945-0936.***

***NOTE: IF SENDING BY COURIER PLEASE CONTACT THE OFFICE FOR SHIPPING ADDRESS.***

➤ ***If you have any questions regarding the application please contact memberships*** ◀

➤ ***If paying by credit card, please phone in the credit card information*** ◀

\* The C.P.R.A. GST number is 121834881RT. GST ***does not*** apply to the insurance portion of your membership dues.

# CANADIAN PROFESSIONAL RODEO ASSOCIATION

*This form must be filled out, signed, notarized and on file with the Canadian Professional Rodeo Association, 272245 RR 2, Airdrie, Alberta T4A 2L5 or fax to (403) 945-0936 before a permit or membership card can be issued.*

CITIZENSHIP: CANADIAN  AMERICAN  OTHER \_\_\_\_\_ S.I.N./S.S.(Mandatory) \_\_\_\_\_

Please state current or former Steer Riding, Permit, Member Card or P.R.C.A. No. \_\_\_\_\_

PRINT FULL NAME OF APPLICANT \_\_\_\_\_

PRINT FULL PERMANENT ADDRESS \_\_\_\_\_

City Prov/State Postal/Zip Code

DATE OF BIRTH: MONTH \_\_\_\_\_ DAY \_\_\_\_\_ YEAR \_\_\_\_\_ SEX \_\_\_\_\_ PHONE # (\_\_\_\_\_) \_\_\_\_\_

## DELETE CLAUSE "A" IF APPLICANT IS UNDER 18 YEARS OF AGE.

- N.B.** If applicant is under 18 years of age, then the parent(s) or the legal guardian having custody of the applicant must sign the application. We require proof of guardianship before application will be processed.
- \*A** I hereby warrant and represent that I am 18 years of age or older.

I AGREE TO BECOME FAMILIAR WITH AND ABIDE BY ALL C.P.R.A. BY-LAWS, RULES AND REGULATIONS DURING THE TIME I AM A MEMBER OR PERMIT HOLDER OF THE C.P.R.A. AND AGREE TO THE ASSUMPTION OF RISK AND RELEASE AND INDEMNITY SET OUT ON THE REVERSE SIDE OF THIS FORM.

\_\_\_\_\_  
(Signature of Applicant) (Signature of Parent/Guardian if applicant is a minor)

### BENEFICIARY (A beneficiary must be given on this form or your membership will not be processed).

NAME \_\_\_\_\_ RELATIONSHIP TO INSURED \_\_\_\_\_  
(First/Middle/Last Name)

I HEREBY APPOINT THE ABOVE NAMED PERSON(S) AS MY BENEFICIARY(IES) AND IN THE EVENT OF MY DEATH, ENTITLED TO THE PROCEEDS UNDER JARDINE LLOYD THOMPSON CANADA GENERAL POLICY NO. B0901BG0900377000

\_\_\_\_\_  
(Signature of Applicant/Insured Person)

THIS BENEFICIARY DESIGNATION IS REVOCABLE UNLESS OTHERWISE SPECIFIED (only applicable in the Province of Quebec)

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Parent or Guardian)

## DECLARATION

I AM A CITIZEN OF: CANADA - Province of \_\_\_\_\_ OR I AM A CITIZEN OF U.S.A/OTHER. - State of \_\_\_\_\_

I, \_\_\_\_\_ (Name of Applicant) \_\_\_\_\_ (Parent(s) or Guardian Name(s))

DO SOLEMNLY DECLARE THAT I AM (WE ARE) THE PERSON(S) NAMED IN THE FOREGOING INSTRUMENT AND THAT THE INFORMATION THEREIN CONTAINED IS TRUE AND CORRECT, AND I (WE) MAKE THIS SOLEMN DECLARATION CONSCIENTIOUSLY BELIEVING THE SAME TO BE TRUE AND KNOWING IT IS OF THE SAME FORCE AND EFFECT AS IF MADE UNDER OATH AND BY VIRTUE OF THE CANADA EVIDENCE ACT.

DECLARED AT \_\_\_\_\_ (City/Town)

(State or Province of) \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Parent(s) or Guardian Signature)

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
IN AND FOR (Province, State, Country) OF:

\_\_\_\_\_  
COMMISSIONER FOR OATHS  
IN AND FOR THE PROVINCE OF ALBERTA  
MY COMMISSION EXPIRES \_\_\_\_\_

**BY-LAW 7.05 OF THE C.P.R.A. BY-LAWS**

**THIS IS AN ASSUMPTION OF RISK AND RELEASE OF LIABILITY. BY BECOMING A MEMBER OR PERMIT HOLDER OF THE C.P.R.A., YOU ARE AGREEING TO ASSUME CERTAIN RISKS AND TO RELEASE THE C.P.R.A. AND OTHER PARTIES FROM LIABILITY. PLEASE READ THIS PROVISION CAREFULLY.**

Members and Permit Holders acknowledge that rodeos generally are dangerous activities by their inherent nature and that participation in a rodeo as a competitor, independent contractor, official, labourer, volunteer or observer in areas to which access to the general public is restricted (including, without limitation, the rodeo arena, competition area, chutes, pens and other areas reserved and intended for use or access by the rodeo participants or otherwise restricted to the general public) exposes the participant to substantial and serious hazards and risks of property damage, personal injury and/or death. Members acknowledge that their participation in C.P.R.A. sanctioned rodeos likewise involves such hazards and risks. Being fully aware that participation in a C.P.R.A. sanctioned rodeo will result in exposure to substantial and serious hazards and risks of property damage, personal injury and/or death, each Member and Permit Holder, in consideration of being permitted to participate in the C.P.R.A. sanctioned rodeo in any capacity, does by such participation agree to assume such hazards and risks and does thereby discharge, waive, and release the C.P.R.A., C.P.R.A. properties, all sponsors, all other Members and Permit Holders (including, without limitation, Contestants, Stock Contractors, Rodeo Producers and Contract Personnel), any Rodeo Committee, and any other C.P.R.A. sanctioned rodeo production entity involved in the sanctioning, production, organization, conduct, sponsoring and/or performance of the subject rodeo (and such persons' or entities' affiliated, related or subsidiary companies and their respective officers, directors, employees and agents) from all claims, demands and liabilities for any and all property damage, personal injury and/or death or other responsibility arising from such Member's or Permit Holder's participation in the C.P.R.A. sanctioned rodeo, including claims, demands, liabilities and other responsibilities that are know or unknown, foreseen or unforeseen, future or contingent, and whether or not such claims, demands, liabilities, and other responsibilities are occasioned by the negligence of the parties so released by such Member or Permit Holders, by the hazards and risks so assumed by such Member or Permit Holder, or otherwise. Such Member or Permit Holder shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against the parties so released arising out of, or related to, the claims, demands, liabilities and other responsibilities so discharged, waived and released by such Member or Permit Holder. The undertakings and covenants of the foregoing provisions shall be binding upon each Member and Permit Holder, his or her spouse, heirs, legal representatives, successors, and assigns.

Members and Permit Holder's acknowledge that they are and remain fully responsible for obtaining and maintaining proper and adequate medical and dental coverage and or insurance and further that the CPRA does not carry or have any responsibility to provide any such coverage or insurance, other than the general Members insurance plan.

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent or Guardian Signature** (if applicant is a minor) \_\_\_\_\_

# CANADIAN PROFESSIONAL RODEO ASSOCIATION

## Declaration for Canadian Standings Eligibility

**Declaration must be completed before *any* membership will be processed.**

I \_\_\_\_\_ declare that I  
Print Name

\_\_\_\_\_ a) am a Canadian citizen (if you do not reside in Canada, a copy of your birth certificate is required)

\_\_\_\_\_ b) have landed immigrant status (and have been approved by the C.P.R.A. Board of Directors)

\_\_\_\_\_ c) am eligible for the Canadian Standings, but I am not (a) or (b)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

The above information will be considered "official" until the C.P.R.A. office is otherwise notified in writing and upon approval of eligibility by the Association Board of Directors.

DO SOLEMNLY DECLARE THAT I AM THE PERSON NAMED IN THE FOREGOING INSTRUMENT AND THAT THE INFORMATION THEREIN CONTAINED IS TRUE AND CORRECT, AND I MAKE THIS SOLEMN DECLARATION CONSCIENTIOUSLY BELIEVING THE SAME TO BE TRUE AND KNOWING IT IS OF THE SAME FORCE AND EFFECT AS IF MADE UNDER OATH AND BY VIRTUE OF THE CANADA EVIDENCE ACT.

DECLARED AT: \_\_\_\_\_  
City  
(State)  
(Province of) \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Parent(s) or Guardian Signature

THIS \_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

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

\*\*\*\*\*  
APPLICATIONS SIGNED BY  
COMMISSIONER FOR OATHS  
ARE ONLY APPLICABLE TO  
THE PROVINCE OF ALBERTA  
\*\*\*\*\*

\_\_\_\_\_  
IN AND FOR (Province, State, Country) OF:

\_\_\_\_\_  
COMMISSIONER FOR OATHS  
IN AND FOR THE PROVINCE OF ALBERTA  
MY COMMISSION EXPIRES \_\_\_\_\_



# CANADIAN PROFESSIONAL RODEO ASSOCIATION 2010 MEMBER HISTORY FORM



*Completed Member History Form* must be returned with *all applications*  
(We will not be responsible for any mistakes in personal data published that has not been updated)

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_ Email: \_\_\_\_\_

I hereby agree to allow the C.P.R.A. to release my personal information (address & phone #) to media, C.P.R.A. Committees and sponsors when requested.

*Initial* \_\_\_\_\_

I do not wish to have my personal information (address & phone #) released to the media, C.P.R.A. Committees and sponsors unless I have been contacted first for permission.

*Initial* \_\_\_\_\_

**SIZES**

Boot: \_\_\_\_\_ Hat: \_\_\_\_\_  
 Shirt: \_\_\_\_\_ Jacket: \_\_\_\_\_ Jeans: \_\_\_\_\_

**RODEO HISTORY**

Current events worked: \_\_\_\_\_  
 Year turned professional (after permit card): \_\_\_\_\_  
 Years qualified for CFR \_\_\_\_\_ NFR \_\_\_\_\_  
 Rodeo titles won: \_\_\_\_\_  
 First rodeo, year and event(s): \_\_\_\_\_  
 Timed event member's horse(s):  
 Name: \_\_\_\_\_ Event: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_  
 Name: \_\_\_\_\_ Event: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_

**GENERAL**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
 Nickname: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
day/month/year  
 Marital status: \_\_\_\_\_ Wife/Husband's name: \_\_\_\_\_  
 Children: (sex & name) \_\_\_\_\_  
 Other achievements / titles / college: \_\_\_\_\_  
 \_\_\_\_\_  
 Occupation other than rodeo: \_\_\_\_\_  
 Special interests: \_\_\_\_\_  
 Family / Relatives in rodeo (events): \_\_\_\_\_

(Names & Event)