

4-H MEMBER PARTICIPANT APPLICATION

Texas 4-H Calf Roping and Break-A-Way School

June 19-23, 2016

Name _____

Age _____ Sex _____ County: _____ District: _____

Home Address _____ Town _____ Zip: _____

Parent's Phone (Home) _____ (Office) _____

E-Mail Address:
(please make legible) _____

T-Shirt Size YM YL AS AM AL

Have you attended a previous Texas 4-H Roping School? Yes / No If yes, what year(s)?

Are you a junior leader in 4-H? Yes/No What project:

Why do you want to attend?

What is your previous experience in roping?

Do you own or have available a satisfactory roping horse?

I agree to abide by the rules of the Texas 4-H Calf Roping School and conduct myself in a proper and courteous manner throughout the duration of the school.

Signature of 4-H Member

I understand the rules and conditions for attendance at the Texas 4-H Calf Roping School and consent for my child to participate. I agree to release the Texas A&M AgriLife Extension, the instructors of the school, Tarleton State University of Liability in case of injury or damage to my child, equipment and horse during and as a result of participating in the Texas 4-H Calf Roping School.

Signature of Parent or Guardian

Please Check That These Documents Are Sent To:

- Copy of EIA Test Papers Enclosed
- 4-H Member Participant Application
- Adult Participant Application
- Code of Conduct
- Medical Release
- Payment

PLEASE RETURN THESE DOCUMENTS NO LATER THAN May 1.

