

CRAWFORD COUNTY FAIR CALF SCRAMBLE

Monday July 17, 2017



Calf Scramble

7:30 PM in the Grandstand Sponsored by:

2017 Calf Scramble Sponsorship Form

I/We would like to be a contributor to the 2017 Calf Scramble. My donation of \$_____ is enclosed.

Name (Contact)

Company Name: _____

Billing Address: _____

City _____ State _____ Zip _____

Authorization Signature:

Please make checks payable to / mail to:
Crawford County Ag Society
PO Box 188
Bucyrus, OH 44820

**Crawford County Ag Society is a non-profit organization; all donations are tax deductible.

CRAWFORD COUNTY FAIR CALF SCRAMBLE

MONDAY JULY 20, 2017

2017 Crawford County Fair Calf Scramble Application

Applications will be taken until classes are full
Helmets are strongly recommended for all participants.

Entry fee: \$10.00

(Make checks to: Crawford County Ag. Society)

APPLICANT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____ AGE AS OF July 1, 2017 _____

E-MAIL ADDRESS: _____

PHONE _____ SHIRT SIZE _____

If Minor: PARENTS NAME _____

Hold Harmless Agreement:

I do hereby consent and agree to hold said Crawford County Fair and its entities, referees, participants, sponsors, Scramble committee, and all persons individually or collectively, harmless from any liability, bodily injury, any other damage, or injury sustained or suffered while I participant in the scramble at the 2017 Crawford County Fair.

I also agree that we have been given a copy of the official rules and regulations for the calf scramble. I agree to abide by rules until the completion of the calf scramble program.

SIGNATURE OF PARTICIPANT: _____ DATE: _____

Minor Release Agreement (Required for all Minor Participants):

I, _____ parent of _____ do hereby consent and agree that it is permissible for our said minor child to compete in the 2017 Crawford County Fair Calf Scramble, and I (we), jointly by our said minor child, do hereby consent and agree to hold said Crawford County Fair and its entities, referees, participants, sponsors, Scramble committee, and all persons individually or collectively, harmless from any liability, bodily injury, any other damage, or injury sustained or suffered while said minor child is a participant in the scramble at the 2017 Crawford County Fair.

I (we) also agree that we have been given a copy of the official rules and regulations for the calf scramble. I (we) along with our child, agree to abide by rules until the completion of the calf scramble program.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____