



## 2023 Gaff-N-Go Participant Forms

**PARTICIPANTS AND JUDGES:** These forms are required in order to participate in the 2023 Gaff-n-Go Rodeo.

### 2023 GAFF-n-GO LINEWORKER'S RODEO ASSOCIATION RELEASE & INDEMNIFICATION AGREEMENT

Please fill out this form completely and submit. All forms need to be completed and received by May 1, 2023.

**Full Name:** \_\_\_\_\_

**County/City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**ENTIRE AGREEMENT AND SEVERABILITY:** This Release & Indemnification Agreement contains the entire agreement between the parties hereto, except for any separate/additional Release & Liability Limitation Agreement which is only between Participant and his or her employer. The terms of this agreement are contractual and not merely recitals. In the event that any part of this Release & Indemnification Agreement is deemed ineffective, all other parts of the Release & Indemnification Agreement shall remain valid and in full effect.

I, "name listed above" (hereinafter "Participant") resident of "county/city listed above" County/City in the State of "state listed above", the undersigned, with the intent of binding myself, my spouse, and my heirs, legal representatives and assigns, have executed this Release & Indemnification Agreement as my own free act and deed.

**RELEASE:** Participant, being of lawful age, has requested the opportunity to participate in the 2022 Gaff-n-Go Lineworker's Rodeo (hereinafter "Lineworker's Rodeo") to be located on the grounds of the Meadow Event Park in Doswell, Virginia on May 19 & 20, 2023. Participant, in consideration for being permitted to participate in one or more events at the Lineworker's Rodeo, do for myself, my spouse, and my heirs, legal representatives and assigns, hereby release and forever discharge the Meadow Event Park and all sponsors, including the Gaff-n-Go Rodeo planning committee, the County of Caroline, the VA, MD & DE Association of Electric Cooperatives (hereinafter the "Association") and its members, Dominion Energy Virginia, associated vendors and volunteers, and their officers, directors, shareholders, employees, agents, representatives, attorneys, successors,

and affiliates (hereinafter "Releasees") from any and every claim, demand, action or right of action, of whatever kind or nature, either in law or equity, arising from my participation in the Lineworker's Rodeo, whether caused by negligence of Releasees or otherwise.

**MEDICAL RELEASE AND AUTHORIZATION:** Participant further releases Releasees, officials, other participants, and any professional person of any claim whatsoever on account of first aid or medical treatment or services rendered at the Lineworker's Rodeo. In the event that Participant is unable to consent to emergency medical treatment, the Participant authorizes and consents to emergency medical care to be given as the judgment of medical personnel dictate.

**ASSUMPTION OF RISKS:** Participant acknowledges and UNDERSTANDS THAT PARTICIPATION IN THE LINEWORKER'S RODEO IS A DANGEROUS ACTIVITY and freely assumes all risks that may occur as a result of participation in the Lineworker's Rodeo, such as bodily or personal injuries up to and including SERIOUS INJURY, DISABILITY OR DEATH, whether those risks are known specifically or not.

**DISCLAIMER OF WARRANTIES:** Participant hereby agrees and understands that Releasees have made neither representations nor warranties, express or implied, regarding safety or conditions at the Lineworker's Rodeo. Participant also understands that the Meadow Event Park is not a sponsor of or participant in the Lineworker's Rodeo and is merely leasing the ground to the other Releasees.

**INDEMNIFICATION AGREEMENT:** Participant, in consideration for being permitted to participate in one or more events at the Lineworker's Rodeo, agrees to indemnify, defend and hold harmless the Association and other Releasees, from any loss, liability, damage or cost, including attorneys' fees and third party claims, that any of them may incur due to Participant's participation in the Lineworker's Rodeo or Participant's presence in the Meadow Event Park in Doswell, Virginia for any activities in connection with or arising out of the Lineworker's Rodeo, whether caused by negligence of the Releasees or otherwise.

**Print Name:** \_\_\_\_\_

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

Signature must be by hand, digital signatures not accepted. Please print, sign and upload to registration site.

**Date** \_\_\_\_\_



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**PARTICIPANTS AND JUDGES:** These forms are required in order to participate in the 2023 Gaff-n-Go Rodeo.

### 2023 GAFF-N-GO LINEWORKER'S RODEO PARTICIPANT'S EMERGENCY MEDICAL FORM AND RELEASE INFORMATION

Please fill out this form completely and submit. All forms need to be completed and received by May 1, 2023.

**Employer:** \_\_\_\_\_

**Coordinator Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**INSTRUCTIONS:** Please complete one form for each participant in the 2023 Gaff-n-Go Lineworker's Rodeo (hereinafter "Lineworker's Rodeo"), whether the participant is a lineworker (apprentice or journeyman), an equipment operator, OR a judge. THIS FORM IS REQUIRED FOR ANYONE WHO IS TAKING PART IN LINEWORKER'S RODEO ACTIVITIES AS A PARTICIPANT. SHOULD A PARTICIPANT BE INJURED OR OTHERWISE REQUIRE EMERGENCY MEDICAL ATTENTION, EMERGENCY MEDICAL PERSONNEL NEED YOUR BASIC MEDICAL INFORMATION. We ask that you also provide contact information for someone who can make health care decisions on your behalf in an emergency (or who knows your wishes or the contents of an applicable advance directive). Please complete each section OR check the relevant box. This form will be used only for purposes related to the Lineworker's Rodeo or in the event of an emergency. Assuming it is not needed, this form will be destroyed no later than three months after the Lineworker's Rodeo has concluded.

**RELEASES & MEDICAL AUTHORIZATION:** Your employer, may, optionally, ask you to sign an additional release form prior to the Lineworker's Rodeo on its own behalf. This may be done in advance. The "Association Release & Indemnification Agreement," a copy of which is enclosed with

the registration materials for you to read and review. As part of this REQUIRED "Association Release," you authorize emergency medical treatment on your behalf, should you be unable to consent to such treatment, to be instituted without delay as the judgment of onsite medical personnel may dictate.

**MEDICAL INFORMATION:**

Check here if NONE to report.

Please provide any basic medical history information that might be useful in a medical emergency, including (without limitation) any information about chronic conditions, such as asthma, diabetes, hypertension, or cardiac conditions.

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**LIMITATIONS:**

Check here if NO LIMITS on treatment.

Please list any limitations on emergency medical treatment, such as religious restrictions on receiving blood or blood products.

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**CURRENT DRUGS:**

Check here if NOT CURRENTLY TAKING any medications.

Current medications you are taking, and why? PLEASE LIST HERE AND BRING WITH YOU TO THE LINEWORKER'S RODEO ANY EMERGENCY MEDICATIONS, SUCH AS AN ASTHMA INHALER OR AN EPIPEN FOR ALLERGIC REACTIONS.

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**ALLERGIES:**

Check here if NONE to report.

**Any drug, food, plant, or insect bite allergies?**

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**EMERGENCY CONTACTS:**

**Emergency Contact Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Second Emergency Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

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

Signature must be by hand, digital signatures not accepted. Please print, sign and upload to registration site.

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