Dear Student,
We look forward to having you with us for the Sankey Rodeo School September 5-6, 2026, to be held at the Mattox Arena Derby, KS. Check in is at 8:00am Saturday at the arena. The address is 4418 East 83rd St South, Derby, Kansas 67037.
The closest motel is the Sleep Inn and Suites, 316-425-6077.

We'll cover a great deal of information with lecture, drills, demonstration, video, etc. I encourage you to do two things: (1) Be on time. Check-In is at 8:00 am. (2) Bring something to make notes on... and use it. We welcome wives and family members to the school at no cost. Anyone on the grounds who is not family or an enrolled student must be enrolled at least as a Ground School Student; Tuition is $**100** if entered by the enrollment deadline, and includes everything, drills, lectures, lifetime equipment discounts, classroom sessions, etc. except getting on bucking stock. This policy helps us control distractions and was put in place to protect your investment.
Bring any rodeo gear you have. We'll make sure you have pro quality equipment to use FREE during the school. We will provide everything you need except boots.
You must bring your own boots. As a student you will receive lifetime discounts on equipment purchases, starting at the school. CREDIT CARDS may be used for equipment purchases.
The balance of tuition must be paid **four** weeks prior to the start of the school. You may pay online at the website www.sankeyrodeo.com, by phone with a credit or debit card, or mail in the balance due with cashier's check or money order.

THINGS TO BRING TO THE SCHOOL

- COMPLETED, SIGNED AND NOTARIZED RELEASE FORM REGARDLESS OF YOUR AGE!
-IF YOU ARE UNDER 18, PARENT OR LEGAL GUARDIAN SIGNATURE MUST ALSO BE NOTARIZED ON RELEASE
- IF YOU ARE UNDER 18 Consent To Treat FORM COMPLETED, SIGNED AND NOTARIZED
- OIL VALLEY CATTLE COMPANY contestant release form SIGNED AND NOTARIZED REGARDLESS OF AGE
- MATTOX ARENA WAIVER AND RELEASE SIGNED REGARDLESS OF AGE
- PROOF OF MEDICAL INSURANCE required for each student except Ground School students. If Ground School Students do have the insurance and paperwork it will allow them to do more around the bucking chutes when we buck stock.

I look forward to working with you,

Cody Goodwin - Director of Instruction

PARTICIPANT RELEASE FORM

Bring signed, completed, and notarized form to the school with you REGARDLESS OF YOUR AGE.

1. Date: _____

2. **Agreement:** As consideration for being allowed to participate and/or train in the SANKEY RODEO SCHOOL I the undersigned:

3. Name _____ Phone _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ agree to the following:

3. **Acknowledgement of risk:** The undersigned acknowledges that rodeo is a dangerous activity and that the participation in rodeo training exposes the participant to a substantial and serious risk, whether foreseen or unforeseen, including but not limited to property damage, personal injury, and even death. The undersigned expressly acknowledges that his/her participation in the Sankey Rodeo School will involve such a hazard.

4. **Release of sponsors:** The undersigned, being fully aware that participation in the rodeo school will expose him/her to a substantial and even serious risk of property damage, personal injury or death hereby releases all sponsors, Brad Mattox and Mattox Arena, & crew , Sankey Rodeo School LLC and Cody and Jody Goodwin, their officers, all class of members, employees, servants and agents, including their heirs and assigns, from liability for any and all damage, personal injuries or any other claims arising from the undersigned's participation in the rodeo school including those that are known and unknown, foreseen and unforeseen, past, present, future or contingent.

5. **Covenant not to sue:** The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against all sponsors, Brad Mattox and Mattox Arena, & crew , Sankey Rodeo School LLC and Cody and Jody Goodwin, their officers, all class of members, employees, servants and agents, including their heirs and assigns, arising out of, or related to the actions, causes of action, claims and demands hereby waived, released or discharged by the undersigned.

6. **Assurances:** The undersigned has full power, authority, capacity and right without limitation to execute, deliver and perform this release.

7. **Binding effect:** This release shall be binding upon the undersigned, the undersigned's spouse, legal representatives, heirs, successors and assigns. This release has been carefully read by the undersigned, and the undersigned fully understands its terms and conditions and has voluntarily executed and delivered this release on this _____ day of _____, 20_____

MUST BE SIGNED, COMPLETED, AND NOTARIZED REGARDLESS OF AGE.

Age of Participant: _____. Birth date: _____ - _____ - _____.

I, _____, have read the above release in full, fully understand its terms and conditions and I hereby voluntarily execute and deliver this consent to attend and participate in the rodeo school. I further agree to be dully bound by the release's terms and conditions in both my individual capacity and/or in my capacity as parent or legal guardian for rodeo participant.

PARTICIPANT SIGNATURE _____

Consent of Parent or Legal Guardian _____

Note: Participant under 18 years of age must have the above signed by their parent(s) or guardian(s), completed, and notarized.

NOTARIAL CERTIFICATE

State of _____ County of _____

On this _____ day of _____, 20_____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

Notary Public Signature: _____ Commission Expires: _____

Notary Public Printed Name: _____ Notary Seal / Stamp:

My commission expires: _____ Notary ID #: _____

CONSENT TO TREAT FORM

Parent/Legal Guardian Consent to Treat — If participant is under 18 years of age bring signed, completed, and notarized form to the rodeo school with you.

As Parent/Legal Guardian I/We give full consent to provide any and all medical treatment as needed in the event of any emergency for my/our child who is under the age of 18.

Child's Name: _____ Emergency Contact: _____

Child's Age: _____ Phone Number(s): _____

Child's Birth Date: _____ Phone Number(s): _____

Parent / Guardian Signature: _____

Parent / Guardian Signature: _____

Date: _____

Any Special Medical Concerns:

_____

_____

_____

Medicines Being Taken Now:

_____

_____

_____

Medical Insurance: _____ Policy Number: _____

NOTARIAL CERTIFICATE

State of _____ County of _____

On this _____ day of _____, 20_____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

Notary Public Signature: _____ Commission Expires: _____

Notary Public Printed Name: _____ Notary Seal / Stamp:

My commission expires: _____ Notary ID #: _____

MEDICAL INFORMATION FORM

PLEASE COMPLETE AND RETURN TO STAFF

STUDENT NAME: _____ AGE: _____

Date of birth: _____

ADDRESS: _____

_____

EMERGENCY CONTACT NAME: _____

Phone (to call in case of emergency): _____

Medicine currently taking:

1. _____

2. _____

3. _____

4. _____

Any current medical conditions: _____

_____

Smoker: Y N

Insurance info:

Company name: _____

Policy number: _____

Policy holder name: _____

MATTOX ARENA WAIVER AND RELEASE
WARNING

Under Kansas law, there is no liability for an injury to or the death of a participant in domestic animal activities resulting from the inherent risks of domestic animal activities, pursuant to K.S.A 60-4001 through 60-4004. You are assuming the risk of participating in this domestic animal activity.

In consideration for being allowed to attend and participate in domestic animal activities at Mattox Arena (the "Premises"), the undersigned agrees as follows:

1. Participant Information:

Participant Name_____ Date of Birth:_____

Address:_____

Telephone:_____

Name of Parent/Guardian (if under 18):_____

Emergency Contact Telephone:_____

2. Acknowledgment of Risk: The undersigned acknowledges that participation in domestic animal activities on the Premises involves inherent dangers and that participation in such activities exposes the participant to substantial and serious risks, whether foreseen or unforeseen, including, but not limited to, property damage, personal injury. and death. The undersigned expressly acknowledges that participation in domestic animal activities on the Premises will involve such hazards.

Inherent risks of domestic animal activities include, but shall not be limited to: (1) The propensity of a domestic animal to behave in ways ie., running, bucking, biting, kicking, shying, stumbling, rearing, falling or stepping on, that may result in an injury, harm or death to persons on or around them; (2) the unpredictability of a domestic animal's reaction to such things as sounds, sudden movement and unfamiliar objects, persons or other animals; (3) certain hazards such as surface and subsuface conditions; (4) collisions with other domestic animals or objects; and (5) the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the domestic animal or not acting within such participant's ability.

3. Release of Liability: The undersigned, being fully aware that participation in domestic animal activities on the Premises will expose the participant to substantial and serious risks of property damage, personal injury or death, hereby releases Mattox Arena and Brad J. Mattox, their officers, all class of members, employees, servants and agents, including their heirs and assigns from liability for any and all damages, personal injuries, or any other claims arising from the Participant's participation in domestic animal activities on the Premises, including those that are known or unknown, foreseen and unforeseen, past, present, future, or contingent.

4. Covent Not to Sue: The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit, or other proceeding against Mattox Arena or Brad J.Mattox, their officers, all class of members, employees, servants and agents, including their heirs and assigns, arising out of, or relating to the actions, causes of action, claims and demands hereby waived, released or discharged by the undersigned.

5. Further Assurances: The undersigned has full power, authority, capacity and right without limitation to execute, deliver, and perform this waiver and release.

6. Binding Effect: This waiver and release shall be binding upon the undersigned, the undersigned's spouse, legal representatives, heirs, successors, and assigas. This waiver and release has been carefully read by the undersigned and the undersigned fully understands its terms and conditions and has voluntarily executed and delivered this waiver and release.

7. Entire Agreement: This waiver and release contains the entire agreement between the parties and supersedes any prior written or oral agreement concerning the subject matter of this waiver and release. The provision of this waiver and release may not be waived, altered, amended, or repealed, except by written consent of all parties.

c I HAVE READ, UNDERSTAND, AND FULLY AGREE TO THE TERMS OF THIS WAIVER AND RELEASE. I UNDERSTAND AND CONFIRM THAT BY SIGNING THIS WAIVER AND RELEASE I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. I HAVE SIGNED THIS WAIVER AND RELEASE FREELY, VOLUNTARILY, UNDER NO DURESS OR THREAT OF DURESS, WITHOUT INDUCEMENT, PROMISE OR GUARANTEE. MY SIGNATURE IS PROOF OF MY INTENTION TO EXECUTE A COMPLETE AND UNCONDITIONAL WAIVER AND RELEASE OF ALL LIABILITY TO THE FULLEST EXTENT OF THE LAW. I AM 18 YEARS OF AGE OR OLDER AND AM MENTALLY COMPETENT TO ENTER INTO THIS WAIVER AND RELEASE. IF I AM A PARENT OR GUARDIAN, SIGNING ON BEHALF OF A MINOR, I UNDERSTAND THIS WAIVER AND RELEASE OPERATES EQUALLY AS TO ME AS WELL AS THE MINOR ON WHOSE BEHALF I AM SIGNING, AND I AGREE TO ASSUME RESPONSIBILITY FOR WATCHING AND CARING FOR SAID I MINOR'S SAFETY AND GUARDING AGAINST ALL HAZARDS, NATURAL OR MAN-MADE, WHETHER EXPRESSLY MENTIONED IN THIS WAIVER AND RELEASE OR OTHERWISE.

Participant Signature:_____DATE_____

Parent/Guardian Signature:_____DATE_____

CONTESTANT RELEASE FORM FOR OIL VALLEY CATTLE COMPANY (OVCC)

As consideration for being allowed to participate &/or compete in the OVCC events, I, understand & agree to the following:

1.Acknowledgment of Risk: The undersigned acknowledges that the OVCC events are dangerous activities & that the participation in said events, as either a contestant, an employee or volunteer, exposes the participant to a substantial & serious risk of property damage, personal injury or death. The undersigned expressly acknowledges that his/her participation will involve such a hazard.

2.Release of Sponsors: The undersigned being fully aware that participation in the OVCC events will expose him/her to a substantial & serious risk of property damage &/or personal injury or death, hereby releases all sponsors from liability for any & all property damage, personal injuries or other claims arising from the undersigned's participation in said events including those that are known & unknown, foreseen & unforeseen, future or contingent.

3.Covenant Not to Sue: The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against the sponsors, officers, directors, employees, agents or affiliates associated with event concerning, arising out of, or related to the actions, causes or action, claims & demands hereby waived, released or discharged by the undersigned.

Assurances: The undersigned has full power, authority, capacity & right without limitation to execute, deliver & perform this release.

4.Binding Effect: This release shall be binding upon the undersigned & the undersigned's spouse, legal representatives, heirs, successors & assigns.

5.Note: Participants under 18 years of age must have the following signed by their parent or guardian.

6.Consent to Treat: I hereby give the EMS & the Area Community Hospital the right to treat the above listed child/children, which I am the parent or guardian of, should the need arise.

I have read the above release in full. I totally understand its terms & conditions & I hereby voluntarily execute & deliver this consent to contestant's participation in the OVCC events. I further agree to be fully bound by the release's terms & conditions in both by individual capacity & in my capacity as parent or legal guardian for the undersigned.

Contestant PRINTED Name: **Contestant Date of Birth:**
Parents/Guardian & or Contestant Signature:
Date:
Notary: