

**Clinic Registration Form**  
**20th Annual Miss Rodeo USA Clinic**  
**August 5th-7th, 2022 – Ozark, AR**

Name: \_\_\_\_\_  
Age: \_\_\_\_\_ (Accepting girls 8-27 years of age, or note if observing)  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
T-Shirt  
Size: \_\_\_\_\_

My goal rodeo queen title is: \_\_\_\_\_

**PAYMENT:**

\$350 -Participant with hands-on horsemanship ; Fee enclosed \_\_\_\_\_

\$300-Participant without hands-on horsemanship ;Fee enclosed \_\_\_\_\_

\$150 - Observer (committees, parents, directors); Fee enclosed \_\_\_\_\_

**NOTE:**

Only payment in the form of mailed cashier's checks will be accepted. Our preferred method of payment is by cashiers check. NOTE: All meals will be provided during the clinic (breakfast/lunch/dinner).

**No refunds will be made after payment is received.**

**TRANSPORTATION:**

I will be flying into an Airport: YES / NO

If yes, what airport: \_\_\_\_\_

Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

I will be driving to Ozark, AR and will arrive approx. (Date/time):  
\_\_\_\_\_

**LOCATION OF CLINIC:**

North Franklin County Fair Grounds in Ozark, AR

806 N 29th St, Ozark, AR 72949

## ACCOMMODATIONS:

The Miss Rodeo USA committee is offering a lodging option off site. The Oxford Inn in Ozark, AR , 305 N. 18th St, **Ozark AR** will be our clinic's host hotel for your stay in Ozark, AR. Blocked rooms for Two Queen Beds per night will be offered to clinic guests/participants. To access the blocked room rate you may call the hotel directly [\(479\) 667-1131](tel:4796671131) and book your stay under the group name Miss Rodeo USA Clinic.

*\*Please note that although it is encouraged to stay at the clinic's host hotel, it is not required.*

## ADDITIONAL NOTES:

All Participants Will Receive:

- \* Clinic Binder & Study Guide
- \* Valuable pageant information & tips
- \* Gifts & prizes from our great sponsors
- \* All meals provided for participants and observers

Please be aware of the following:

- \* Detailed schedule to follow registration
- \* Clinic will begin EARLY Friday morning - approx. 8am
- \* Room rate begins the Thurs. before the clinic (08/4/22)
- \* We will finish Sunday afternoon and will try to accommodate early flights/long drives. \* Buckles will be awarded after the mock pageant Sunday afternoon.

***DEADLINE TO APPLY: July 30, 2022***

## Applications may be mailed to:

Miss Rodeo USA Clinic, Attn: Micki Musick , PO Box 1071 Ozark, AR 72949

**For any questions or concerns, please contact Micki Musick by phone (479-209-6938) or email ([mickimusick@gmail.com](mailto:mickimusick@gmail.com)).**

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian if Participant is under the age of 18:

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

**DECLARATION OF CONSENT AGREEMENT & WAIVER**  
**Miss Rodeo USA Rodeo Queen Clinic**  
**August 5-7th, 2022**

I, \_\_\_\_\_ will be participating in the Miss Rodeo USA Rodeo Queen Clinic, August 5-7,2022. I attest that I am responsible for myself and belongings in route to and from the Miss Rodeo USA Rodeo Queen Clinic. I also will not hold the Miss Rodeo USA Association, the International Professional Rodeo Association, North Franklin County Fairgrounds or its affiliates liable for anything that may be lost, damaged, or any injury that may occur during the Miss Rodeo USA Rodeo Queen Clinic. I am aware that the State of Arkansas has an Equine law and that any and all injury or accident during the horsemanship section is my own responsibility. I agree to follow the rules and regulations that are covered by the Miss Rodeo USA Association. I also grant the Miss Rodeo USA Association permission for the use of photograph(s) or electronic media images in any presentation of any and all kind whatsoever. By signing, I acknowledge that I am eighteen years of age or older, of sound mind and body, and do so at my own free will.

\*\* Anyone under the age of 18 needs a signature of a parent or guardian

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

*I understand the above statement and agree to the waiver.*

<b>Participant (Printed name)</b> _____	<b>Participant (Signature)</b>
_____	<b>If under 18, Guardian</b>
<b>(Printed Name)</b> _____	<b>Guardian (Signature)</b>
_____	<i>Notary Public (SEAL)</i>

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