



HEADLINE ENTERTAINMENT & EVENTS

Wednesday, August 28, 2024



Calf Scramble

7:30 p.m. in the North Grandstand Sponsored by:

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Broken Arrow
BOOT CO.

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COMMERCIAL-RESIDENTIAL-AGRICULTURAL

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Wednesday, August 28, 2024

2024 Hancock County Fair Calf Scramble Application

Applications will be taken until classes are full.

Helmets are strongly recommended for all participants.

Open to Hancock County Residents Only

Entry fee : \$20.00

(Make checks payable to: Hancock County Ag. Society)

APPLICANT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DATE OF BIRTH _____ AGE AS OF August 28, 2024 _____

E-MAIL ADDRESS: _____

PHONE _____ SHIRT SIZE _____

If Minor: PARENTS NAME _____

I do hereby consent and agree to hold said Hancock 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 2024 Hancock 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 2024 Hancock County Fair Calf Scramble, and I (we), jointly by our said minor child, do hereby consent and agree to hold said Hancock 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 2024 Hancock 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: _____