

Chisago County Ag Society Pedal Pull Release Form

Please Fill Out Completely:

Contestant's Name: _____ by

Girl

Address: _____

City: _____ State : _____ Zip: _____

Contestant's Age: _____ DOB(Month, Day, Year) _____

Phone

Number: _____ |

HEREBY RELEASE CHISAGO COUNTY AGRICULTURAL SOCIETY AND ASSOCIATES AND EVENT SPONSORS OF ANY LIABILITY RESULTING FROM PARTICIPATING IN THE KIDS PEDAL PULL.

Parent/guardian

Signature: _____

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