

**The International Cat Association
Junior Exhibitor Program
Annual Enrollment Application
Show Season 2013-2014**

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Home Phone: _____

Parent Name: _____ Cell Phone: _____

Parent Name: _____ Cell Phone: _____

If parent cannot be reached, Name: _____ Cell Phone: _____

Insurance Company: _____ Policy #: _____ Group #: _____

AUTHORIZATION TO PARTICIPATE AND RELEASE OF LIABILITY FORM

1. I certify that the information given on this application is accurate. I have read and agree by the International Cat Associations Code of Ethics as well as the rules established by the Junior Exhibitor Program.
2. I understand that this activity entails unknown and unanticipated risks, which could result in physical and emotional injury, paralysis, death, or damage to my son/daughter, myself, to property, or to third parties. I acknowledge that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. As a participant in The International Cat Association's Junior Exhibitor program, I acknowledge that the risks may involve but are not limited to being bit or scratched by a cat, or all that may result in contusions, sprains, fractures, broken bones, infections, and other injury.
3. I agree to provide proof of medical insurance with this authorization form. I agree and fully understand that The International Cat Association will provide liability only for any negligence on its part which occurs during authorized shows.
4. I hereby give consent to my daughter/son to participate in this Program and assure that my son/daughter will have access to a parent or guardian at all times in case of emergency or any other non-planned occurrence or event.
5. I, the undersigned, hereby release and discharge The International Cat Association, including its officers, employees, agents, servants and volunteers (herein collectively referred to as "TICA"), from all liability arising out of or in connection with any involvement in TICA or its shows, programs and activities that may be filed on behalf of or for the above-named minor. For the purposes on this agreement, "liability" means all claims, demands, losses, causes of action, suits or judgments of any and every kind on account of any injury to the person or property of the above-named minor that occurs as a result of any involvement with TICA, its programs, activities and shows and that results from any cause.

In case of an accident, I give permission to take _____ to a physician. I hereby authorize the physician to take necessary care of my child and I agree to assume responsibility for all medical services.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Participant Signature: _____ Date: _____

Loridominick@yahoo.com Lori Dominick 3481 S Sunnyslope Rd New Berlin WI 53151