



# 2024-2025 RODEO SEASON

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RODEO SECRETARY: Lainey Stokes (863)227-8461 [afjrarodeosec@yahoo.com](mailto:afjrarodeosec@yahoo.com)

Dear Prospective Member:

We would like to take this opportunity to thank you for your inquiry regarding the ALL FLORIDA JUNIOR RODEO ASSOCIATION (AFJRA). We are excited to offer this opportunity to participate in America's #1 sport . . . RODEO!

The fiscal year for AFJRA is July 1<sup>st</sup> to June 30<sup>th</sup> of each year. The age limit is 5 to 14 years of age. A copy of your birth certificate is required only once when you join AFJRA as a new member. Members must be at least five (5) years old to join and enrolled in kindergarten. If a member turns 15 during the fiscal year, they will be able to continue the rodeo season, however, you cannot join AFJRA if you are a member of the FL High School Rodeo Association (FHSRA) or if you are going into the 9<sup>th</sup> grade.

The following events are for both boys and girls from age 5 to 14, with the exceptions/requirements as stated. Each event has an adult and student director:

BAREBACK STEER RIDING – Open to BOYS ONLY with a minimum age of 10

BULL/STEER RIDING – Open to BOYS ONLY with a minimum age of 10

CHUTE DOGGING – Open to Boys and Girls with a minimum age of 10

TIE-DOWN CALF ROPING

BREAKAWAY CALF ROPING

GOAT TYING

BARREL RACING – All Girls and (Boys age 9 or younger as of July 1<sup>st</sup>)

POLE BENDING – All Girls and (Boys age 9 or younger as of July 1<sup>st</sup>)

DALLY TEAM ROPING

CUTTING

Entry Fees are \$30 per event per day and must be paid thirty (30) minutes prior to the start of the rodeo. There will be a grounds fee of \$10.00 per family, per location. Additional rodeo fees may be required for locations with optional or required stalls and/or electric hookups. There will be a mandatory "dress down t-shirt" fundraiser of \$25 per contestant due at the first rodeo. There is also a \$150 FAMILY sponsorship obligation due in September of the fiscal year in which you are required to pay or find sponsors for. (See Article Q for returned check policy).

All contestants must provide proof of enrollment in school from previous school year as a MANDATORY contingency for membership and participation in first rodeo. Any member joining after the first rodeo must provide their most recent report card/progress report as a MANDATORY contingency for membership and participation in AFJRA. All contestants are required to maintain a grade point average of 2.0 or above on a 4.0 scale, or its equivalent, in the previous reporting period or a cumulative grade point average of 2.0 or above on a 4.0 scale, or its equivalent in the courses required by s. 1002.3105(5) or s. 1003.4282. Homeschooled contestants must follow Florida State Statute 1002.41 or any superseding Florida Statute requirements. All contestants must submit a verified/ acceptable copy of the most recent report card/ progress report as verification of enrollment from previous school year prior to participating in the first scheduled rodeo or first rodeo entered.

Permit (One Time) Riders are permitted to participate in AFJRA. You must complete the application and are bound to all AFJRA rules. Permit Riders will receive no points or places and must pay \$30.00 for insurance and paperwork processing. If the Permit Rider decides to join, \$15 will be applied toward the full membership, provided Permit Rider joins at the next scheduled rodeo.

**CALL-IN FOR THE FIRST RODEO IS MANDATORY**- AFJRA uses an online "call-in" system which will open Saturday, August 3<sup>rd</sup> at 12:01 a.m. and close on Sunday, August 4<sup>th</sup> at 12 a.m. (you may access the online "call-in system on the website at [www.afjra.org](http://www.afjra.org) or Facebook). If you do not receive an email confirmation of your entry, you can call Mrs. Lainey Stokes our Rodeo Secretary, on Monday, August 7<sup>th</sup> from 7 to 9 p.m. at (863)227-8461. Tentatively, the first rodeo will be in Okeechobee, FL on August 17<sup>th</sup> & 18<sup>th</sup>.

A complete checklist and all required forms are attached. **It is mandatory that the membership packet, in its entirety, be postmarked by August 1<sup>st</sup>. No membership applications will be taken at the first sanctioned rodeo.** If you have any questions, you can call Mrs. Katie Russo-Valdera, State Secretary, at (954)332-8614.

You will find AFJRA a worthwhile organization of invaluable investments—faith, family, friends and rodeo kids!

Sincerely,  
AFJRA Board of Directors

[www.afjra.org](http://www.afjra.org)

# 2024-2025 RODEO SEASON MEMBERSHIP CHECKLIST AND ADDITIONAL INFORMATION

Please attach this form to front of the membership packet

Please complete the following forms:

- Membership Application with Accident Insurance Form
- Non-Contestant Membership Application
- Membership Release Agreement – **MUST BE NOTARIZED**
- Membership Release of Liability – **MUST BE NOTARIZED**
- FERPA Agreement
- Most Recent Report Card Demonstrating Successful Progression from The Previous Grading Period/Semester
- Copy of upcoming school year calendar with Report Card release dates (if student is not homeschooled)
- Child's shirt size \_\_\_\_\_ (please specify if youth or adult size is needed; example: YSM or ALG)
- Copy of Birth Certificate – **ONLY NEEDED ONCE (INITIAL MEMBERSHIP)**
- Check made payable to AFJRA for \$95

Membership Fee:	\$30.00
Insurance:	\$40.00
Non-Contestant Membership Fee:	<u>\$25.00</u> <i>**Multi-contestant families—this is only paid once**</i>
Total:	\$95.00

**Mail all above documents & payment to the following – must be postmarked by August 1, 2024.  
No membership packets will be accepted at the first sanctioned rodeo!**

Katie Russo-Valdera  
AFJRA State Secretary  
2224 N CR 436E  
Lake Panasoffkee, FL 33538

OTHER VALUABLE INFORMATION:

HORSE HEALTH PAPERS: Make sure you have a current coggins on your horse(s) with you at all times.

MEDICAL CONSENT FORM: This form will be made available on the website under the tab "Other Info." If you are unable to attend a rodeo in which your child is participating, please make sure you fill out and send a medical consent form. This form should be given to the Treasurer and the "Responsible Party" who is in charge of your child during the rodeo. This form will be necessary in case of a medical emergency.

2024-2025 ALL FL JUNIOR RODEO ASSOCIATION (AFJRA) MEMBERSHIP APPLICATION/ACCIDENT INSURANCE FORM

LAST NAME (Legal)		GENERATION	FIRST NAME (Legal)		MIDDLE NAME
PREFERRED NAME		GENDER <input type="checkbox"/> M <input type="checkbox"/> F	BIRTH DATE	AGE <small>*AGE ON JULY 1<sup>st</sup> 2024</small>	PRIMARY PHONE NUMBER
MAILING ADDRESS			CITY	ZIP CODE	FIRST YEAR MEMBER <input type="checkbox"/> *yes <input type="checkbox"/> no <small>*Attach copy of birth certificate</small>
PRIMARY E-MAIL ADDRESS TO BE USED FOR MEMBER			ANY MEDICAL CONDITIONS/ALLERGIES YOU WOULD LIKE TO ADVISE		

PARENT/GUARDIAN INFORMATION

LAST NAME	FIRST NAME	RELATIONSHIP	PHONE NUMBER
MAILING ADDRESS		CITY	ZIP CODE

LAST NAME	FIRST NAME	RELATIONSHIP	PHONE NUMBER
MAILING ADDRESS		CITY	ZIP CODE

SCHOOL INFORMATION

GRADE	NAME OF SCHOOL	COUNTY	GRADING INTERVALS <input type="checkbox"/> 6 weeks <input type="checkbox"/> 9 weeks <input type="checkbox"/> Home School
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ATTACH A COPY OF YOUR SCHOOL CALENDAR/REPORT CARD SCHEDULE INDICATING REPORT CARD DATES—THIS MUST BE A SEPARATE SHEET OF PAPER AS IT WILL BE GIVEN TO THE REPORT CARD SECRETARY

I, \_\_\_\_\_, desire to become a member of the All Florida Junior Rodeo Association (AFJRA). The yearly membership fee is \$30 per member. I/[We] agree to provide a copy of my birth certificate if this is my first year. (Birth certificates will remain on file as long as member is eligible to compete in AFJRA—then it is shredded). I/[We] agree to submit a copy of every report card I receive per my grade period intervals/report card schedule. I/[We] understand a 2.0 Grade Point Average must be maintained for me to rodeo. I/[We] understand I will not be able to rodeo if I fail to meet any requirements for Report Cards. I/[We] also understand I must complete and have notarized when applicable, all documents relating to my membership. I/[We] agree to abide by all Rules & Regulations of AFJRA and will accept decisions of the Judges and/or Arena Director as Final. I agree to conduct myself in a sportsmanlike manner at all times. By signing this application, I/[We] agree to abide by its contents, and I/[We] agree to relinquish AFJRA, its officers, directors, and members from any responsibility whatsoever for damage or injury connected with any event or function connected with AFJRA.

**MEMBERSHIP ACCIDENT INSURANCE:** Each member of AFJRA must purchase this accident insurance coverage. The premium is \$40 and is for one (1) full fiscal year. This is a secondary insurance policy and is only effective after your personal policy ends. You cannot compete in any AFJRA approved rodeo(s) without being covered by this plan.

Coverage by: Mutual of Omaha  
 \$5,000 Accidental Medical Benefit & \$10,000 Accidental Death \$100 Deductible  
 \$10,000 Double Dismemberment & \$5,000 Single Dismemberment  
 Coverage applies for members while competing in sanctioned AFJRA rodeos

PRINT MEMBER NAME	MEMBER SIGNATURE	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	DATE



2024-2025 ALL FL JUNIOR RODEO ASSOCIATION (AFJRA) MEMBERSHIP RELEASE AGREEMENT

LAST NAME (Legal)	GENERATION	FIRST NAME (Legal)	MIDDLE NAME
MAILING ADDRESS		CITY	STATE
			Florida
			ZIP CODE

THIS AGREEMENT, made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2024, by and between the ALL FLORIDA JUNIOR RODEO ASSOCIATION, INC. (hereinafter called "AFJRA,") and the parents/or legal guardian of the undersigned member, (hereinafter called "Member.")

THAT the AFJRA, being a rodeo association with membership for boys and girls, ages from five through fourteen years, wishes that the AFJRA, its Officers, Directors, and members be relieved from all liabilities for damage or injury connected with any event or function connected with the AFJRA, of which the undersigned Member is engaged.

TO WIT: The AFJRA, its Officers, Directors and members shall not be responsible to the undersigned Member for any injury or damage to him/her or any of his/her property while at any rodeo, event, or function connected with the AFJRA, for any reason whatsoever, and the AFJRA, its Officers, Directors and/or members shall not be liable for any latent defect in the rodeo, event, or function premises, or for any injuries or damages to the undersigned Member, parent/or legal guardian, horse, or equipment sustained in route to or from or during any AFJRA rodeo, event, or function for any cause whatsoever. The Member agrees to indemnify and hold harmless the AFJRA, its Officers, Directors and members from any and all claims, demands, and judgments against the AFJRA, its Officers, Directors and members for any reason whatsoever, or by any matter or happening during, in route to or from or during the time of any rodeo, event or function, as well as all costs, expenses, and attorney fees incurred or expanded by the AFJRA, its Officers, Directors or members in defending the same.

IN WITNESS WHEREOF, the Member and parent/or legal guardian have hereunto set their hands and seals the day, and year first above written.

SIGNED, SEALED AND DELIVERED IN THE PRESENCE OF:

PRINT MEMBER NAME	MEMBER SIGNATURE	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	DATE

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by (name of person acknowledging)\_\_\_\_\_.

(NOTARY SEAL)      (Signature of Notary Public-State of Florida)  
(Name of Notary Typed, Printed, or Stamped)

Personally Known OR  Produced Identification  
 Type of Identification Produced \_\_\_\_\_

2024-2025 ALL FLORIDA JUNIOR RODEO ASSOCIATION (AFJRA) RELEASE OF LIABILITY, INDEMNITY AND AGREEMENT NOT TO SUE

LAST NAME (Legal)	GENERATION	FIRST NAME (Legal)	MIDDLE NAME
MAILING ADDRESS		CITY	STATE
			Florida
		STATE	ZIP CODE

MEMBER, PARENT/GUARDIAN(S) PRINTED NAME(S)

1. **ASSUMPTION OF RISK:** I know and understand the full and complete scope, nature, and extent of the risks involved in entering All Florida Junior Rodeo Association, Inc. events ("Rodeo Event") and engaging in the associated activities and that such risks have been identified and explained to me and that other dangers relative, thereto cannot be foreseen or otherwise contemplated. I understand that there are certain risks and dangers inherent in entering the events and otherwise engaging in an equine activity as defined in Florida Statutes § 773 ("Activity") and that by entering onto the rodeo grounds and/or otherwise engaging in the Activities, I am subjecting myself to the possibility of loss of life, disfigurement, serious bodily injury, and damage to my person as well as loss to my personal property and effects. Having carefully considered these risks, I voluntarily, freely, without coercion, and duress, choose to assume and all such risks and take responsibility therefore and for my actions and the actions of my invitees while on or about the rodeo grounds and otherwise engaged in the Activity. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

2. **RELEASE OF LIABILITY:** I hereby release and discharge All Florida Junior Rodeo Association, Inc. ("Releasees") and its related and affiliated entities and their officers, directors, and independent contractors from and against any and all liability, claims, demands, suits and causes of action whatsoever arising, directly or indirectly, out of any damage, loss or injury to myself, my family, my property or my death, while on, near or traveling to the Rodeo Events or engaged in the Activities whether resulting from the intentional acts, negligence, gross negligence or other fault direct or indirect wither active or passive of any of the Releasees, or from any other cause whatsoever. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

3. **AGREEMENT NOT TO SUE:** I hereby agree not to institute any lawsuit or cause of action, or other claim against any of the Releasees or to initiate or to assist in the prosecution of any claim for damages against any of the Releasees, which I may have by reason of injury to my person or property, or my death, arising from my entering into the Rodeo Events or performing the activities or any other activity thereon, whether caused by the intentional acts, negligence, or fault direct or indirect active or passive from any of the Releasees, or from any other cause whatsoever. I further agree that my heirs, executors, administrators, personal representatives, or anyone else claiming on my behalf shall not institute any lawsuit, cause of action, or claim or demand for damages against any of the Releasees, nor shall they initiate or assist in the prosecution of any claim for damages against the Releasees which I, my heirs, executors, administrators, personal representatives, and/or anyone else claiming on my behalf may have by reason of injury to my person or property, or my death arising from my entering the Rodeo Events or engaging in the activities or any other activity conducted on the rodeo grounds, whether caused by the intentional acts, negligence, gross negligence or other fault, direct or indirect, either active or passive of any of the Releasees, or from any other causes whatsoever, I hereby so instruct my heirs, executors, administrators, personal representatives, or anyone else claiming on my behalf. Should any such lawsuit or cause of action or claim be instituted against any of the Releasees, I agree that such Releasees shall be entitled to recover attorney fees and costs incurred in the defense of such lawsuit or cause of action, including any arising there from. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

4. **INDEMNITY AGAINST THIRD PARTY OF CLAIMS:** I hereby agree to indemnify, save, and hold harmless the Releasees, including attorney fees and costs, from and against any and all lawsuits, claims, actions, causes of actions, or proceedings of every kind and character, including attorney fees and costs, which may be presented or initiated by any other person, firm, entity or personal organization of which may arise, directly or indirectly, from my entering the Rodeo Events or my performance of any activities thereon including the Activity, whether resulting from the intentional acts, negligence, gross negligence, or other fault, either active or passive, of any of the Releasees, or from any other cause whatsoever, or whether such injury or death is incurred by myself or a third party. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

5. **VALIDITY OF AGREEMENT:** I understand that if I institute or if anyone on my behalf, or any other third party, institutes any lawsuit, cause of actions or claims for damages against any of the Releasees because of injury to my person or property, or my death, as a result of my entering the Rodeo Events or to the injury or death or property loss of any third party, this Agreement can and will be used in a court of competent jurisdiction and that said Agreement is binding and enforceable against myself and my heirs, executors, administrators, personal representatives, or anyone else claiming on my behalf. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

6. **NO INSURANCE:** I understand that by entering the Rodeo Events and engaging in activities therein, I am not covered by any accident or general liability insurance policy or any other insurance policy issued to any of the Releasees, and that I am not entitled to make any claims against any insurance which may be maintained on behalf of the Releasees. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

7. **SEVERABILITY:** Should any court of competent jurisdiction deem any provision or cause of this Agreement to be illegal, invalid or unconscionable and unenforceable, such provision or clause shall be fully severable from this Agreement, and in its place, there shall be added to this Agreement a similar provision as near in intent as possible which is not illegal or unconscionable, and this Agreement shall be construed and interpreted as if such illegal, invalid or unconscionable and unenforceable provision of clause had never comprised a part of this Agreement [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

8. **CONTINUATION OF OBLIGATIONS:** I agree that the terms and conditions of this Agreement shall continue in full force and effect now and in the future and at all times during which I am participating in Rodeo Events or engaged in any activities permitted therein, and shall be binding upon my heirs, executors, administrators, personal representatives, and/or anyone else claiming on my behalf. This Agreement is intended to supersede and replace any such prior agreements between the Releasees and myself. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

9. **WAIVE OF RIGHTS:** I fully understand that by signing this Agreement, I am giving up important legal rights and it is my intent to do so and I am doing so freely and without coercion by the Releasees or under any duress. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

10. **ENTIRE AGREEMENT:** I understand this Release contains the entire Agreement between the parties hereto and the terms of this Release and the agreement not to sue supersedes all prior agreements, addendums, amendments, or understandings which existed between myself and the Releasees. Any additions, deletions, or other changes to this Agreement must be made in writing and signed by both parties. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

11. **FLORIDA LAW/WAIVER OF JURY TRIAL/VENUE HEADINGS:** I hereby expressly agree and acknowledge that the laws of the State of Florida, United States of American shall apply to issues involving the construction, interpretation, and validity of this Agreement, and that Florida Law shall govern any dispute arising from the activities covered by this Agreement. The parties agree that any legal proceedings brought by either party in connection with or arising out of this Agreement, shall be brought in the county of Florida which the current President of AFJRA resides. I acknowledge that the headings used herein are for convenience purposes only and have no significance in the interpretation of this Agreement. I HERE WAIVE ANY RIGHT I MAY HAVE TO A TRIAL BY JURY WITH RESPECT TO ANY LITIGATION (INCLUDING BUT NOT LIMITED TO, ANY CLAIMS, CROSS-CLAIMS, COUNTER- CLAIMS, OR THIRD PARTY CLAIMS) ARISING OUT OF, UNDER, OR IN CONNECTION WITH THIS RELEASE, BETWEEN THE PARTIES TO THIS RELEASE, OR IN ANY WAY RELATING TO MY ENTRY ONTO THE PROPERTY OR ENGAGING IN ANY ACTIVITIES THEREON, INCLUDING THE ACTIVITY, THEIR AFFILIATES, SUBSIDIARIES, SUCCESSORS OR ASSIGNS AND IRRESPECTIVE OF WHETHER SUCH LITIGATION ARISES OUT OF THIS RELEASE, BY STATUTES, OR AS A MATTER OF TORT LAW, AND I EXPRESSLY CONSENT TO A NON-JURY TRIAL IN THE EVENT OF ANY OF THE FOREGOING. [\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_] Initials

Acknowledged, accepted and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

PRINT MEMBER NAME	MEMBER SIGNATURE	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE ON BEHALF OF MINOR MEMBER	DATE
PRINT PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE INDIVIDUALLY	DATE

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by (name of person acknowledging)\_\_\_\_\_.

(NOTARY SEAL) (Signature of Notary Public-State of Florida)  
(Name of Notary Typed, Printed, or Stamped)

Personally Known OR  Produced Identification  
 Type of Identification Produced \_\_\_\_\_



# All Florida Junior Rodeo Association

## OPTIONAL CONTESTANT BIO SHEET

2024 - 2025 RODEO SEASON

NAME: \_\_\_\_\_  M  F

PREFERRED NAME (name to be printed on backtag) \_\_\_\_\_

BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE IN SCHOOL: \_\_\_\_\_

NAME OF SCHOOL: \_\_\_\_\_

HOMETOWN: \_\_\_\_\_

NUMBER OF YEARS IN AFJRA \_\_\_\_\_

FIRST YEAR MEMBER/ROOKIE

LAST YEAR MEMBER/8<sup>th</sup> GRADER

PLEASE CHECK EVENTS:

BAREBACK STEER RIDING

BULL/STEER RIDING

TEAM ROPING

TIE-DOWN CALF ROPING

BREAKAWAY CALF ROPING

GOAT TYING

BARREL RACING

POLE BENDING

CHUTE DOGGING

CUTTING



HOBBIES/AREAS OF INTEREST TO SHARE/ANNOUNCE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PARENTS: \_\_\_\_\_

ACCOMPLISHMENTS/AWARDS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE NOTE: THIS INFORMATION WILL BE AVAILABLE TO THE AFJRA ANNOUNCER AND SHARED AS APPLICABLE



## 2024 - 2025 All Florida Junior Rodeo Association

### Home Education Student Eligibility Verification/Academic Progress Report

My child {full name}, \_\_\_\_\_, is registered with the \_\_\_\_\_ District School Board as being properly enrolled in a Home Education Program pursuant to s. 1002.41, Florida Statutes, and has met the academic eligibility requirements (achieved a cumulative grade point average (GPA) of at least 2.0 on a 4.0 unweighted scale for all subjects taken for credit toward pupil progression for grades K-8) of the All Florida Junior Rodeo Association in order to enter, compete and receive points earned.

Listed below is his/her academic record for the required current or previous reporting period. The grade point average shown is based on a 4.0 unweighted academic scale (A = 4, B = 3, C =2, D =1).

SUBJECT	SCHOOL WHERE COURSE WAS TAKEN (school, online, home, etc.)	GRADE	GPA

**CUMULATIVE GPA FOR FINAL REPORTING PERIOD OF THE LAST QUARTER/ REPORTING PERIOD** \_\_\_\_\_

\*ONLY TO BE COMPLETED FOR SUBMISSION AT FIRST ENTERED RODEO

**CUMULATIVE GPA FOR CURRENT REPORTING PERIOD** \_\_\_\_\_

\*CALCULATED BASED ON GRADES REPORTED ABOVE

<b>I certify that the above information is accurate.</b>		
<b>Contestant Name</b>	<b>Parent Name</b>	<b>Parent Signature/ Date</b>

# 2024– 2025 ALL FLORIDA JUNIOR RODEO ASSOCIATION

## FERPA CONSENT TO RELEASE STUDENT INFORMATION

TO: \_\_\_\_\_

(Name of School that will be releasing the educational records)

Please provide information from the educational records of \_\_\_\_\_ (Student's Name)  
to: All Florida Jr. Rodeo Association Report Card Secretary, Jeannette Egozcue.

The only type of information that is to be released under this consent is:

Report Card Results

Grade Point Average

Course Codes

The information is to be released for the following purpose:

Academic/Scholastic Verification

I understand the information may be released orally or in the form of copies of written records, as preferred by the requester. I understand I may revoke this consent upon providing written notice to All Florida Junior Rodeo Association. I further understand that until this revocation is made, this consent shall remain in effect and my educational records will continue to be provided to All Florida Junior Rodeo Association for the specific purpose described above.

Parent Name (print) \_\_\_\_\_

Parent Signature \_\_\_\_\_

Student ID Number \_\_\_\_\_

Date \_\_\_\_\_