

\_\_\_\_\_  
Name of Rodeo  
\_\_\_\_\_  
Date of Rodeo  
\_\_\_\_\_  
Location of Rodeo  
\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Name of Contestant  
\_\_\_\_\_  
Complete Mailing Address  
\_\_\_\_\_  
City, State, Zip Code  
\_\_\_\_\_  
Telephone Number                      Back Number

Check if One Time Only \_\_\_\_\_ \$15.00 (Applies to Non- Members)

**PARENTS MUST SIGN For each event you enter.**

**BOYS EVENTS:**  
Bareback Riding \_\_\_\_\_  
Steer Wrestling \_\_\_\_\_  
Bull Riding \_\_\_\_\_  
Saddle bronc \_\_\_\_\_  
Calf Roping \_\_\_\_\_  
Team Roping \_\_\_\_\_

**GIRLS EVENTS:**  
Pole Bending \_\_\_\_\_ (\$10)  
Goat Tying \_\_\_\_\_ (\$20)  
\$20  
Break Away Roping \_\_\_\_\_ (\$20)  
Barrel Racing \_\_\_\_\_ (\$10)  
(\$10)

I am the Header or Healer. My Partner's name is \_\_\_\_\_

Ground Fees \_\_\_\_\_ (\$20 for LAKEVILLE RODEO) Fee to be paid per family. If paid by another member in the family

Indicate contestants name and back number : \_\_\_\_\_  
(Family members Name)                      Back Number

Total Amount included with entry is: \$ \_\_\_\_\_ (Includes ground fee) Make Checks payable to: MHSRA

Contestants Signature: \_\_\_\_\_

\*\*\*\*\*

We, the parents or guardians of \_\_\_\_\_ (contestant's name)

Give the (local Hospital) \_\_\_\_\_ and physicians on the Medical Staff of the Hospital Permission to administer NECESSARY EMERGENCY treatment for injuries he or she may incur while participating in the

\_\_\_\_\_ High School Rodeo. We hereby release the (local Hospital) \_\_\_\_\_, physicians on the Medical Staff, and the Rodeo Sponsors from all liability.

Signed: \_\_\_\_\_ and \_\_\_\_\_  
(Requires Both Parents/Guardians Signatures)

Subscribed and Sworn to me before this  
\_\_\_\_\_ day of \_\_\_\_\_,  
(Year)

Notary Public: \_\_\_\_\_

(Stamp here)

My Commission Expires: \_\_\_\_\_

\*\*\*\*\*

**School Signature Required:**

**I certify that this student meets  
National High School Rodeo  
Association's GRADE AND CONDUCT  
Qualifications.  
(Current Grade and Conduct Requirements)**

\_\_\_\_\_ (date) \_\_\_\_\_  
(School Administration Signature)

**Entry Deadline:**  
14 days prior to Rodeo

**Draw outs:**  
24 Hours prior to Rodeo

**All Fees:**  
Due with Entry

**Send Entry To:**  
**Terri Grinager**  
**16910 CO RD 3 NE**  
**Miltona, MN 56354**  
**Questions: (218) 943-1780 Evenings**