

## 2022 TRIPLE CROWN RODEOS 26th ANNUAL RODEO SERIES

Burke High School Rodeo – Friday, April 29, 2022@ 1:00 PM CDT 1<sup>st</sup> round Cutting and Reined Cow Horse. Second round to follow.

Burke High School Rodeo – Saturday, April 30, 2022 1<sup>st</sup> perf @ 9:00 AM CDT 2<sup>nd</sup> perf approximately 2pm

Geddes High School Rodeo - Sunday, May 1, 2022 10:00 AM CDT 3rd Performance

CONTESTANTS MUST BE ENTERED AND COMPETE IN ALL THREE RODEOS TO BE ELIGIBLE FOR ALL AROUND SADDLES AND EVENT JACKETS.

**FORM MUST BE POSTMARKED BY APRIL 15, 2022**

Please print

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ TOWN \_\_\_\_\_

2021-22 NHSRA Card # \_\_\_\_\_ EMAIL \_\_\_\_\_

\*For rodeo confirmation please provide an email address above\*

Check only the event you wish to enter at each rodeo.

BURKE 1 <sup>ST</sup> PERF	BURKE 2 <sup>ND</sup> PERF	GEDDES 3 <sup>RD</sup> PERF	PARENT SIGNATURE
_____ \$50	_____ \$50	_____ \$50	\$50 Bareback _____
_____ \$50	_____ \$50	_____ \$50	\$50 Saddle Bronc _____
_____ \$50	_____ \$50	_____ \$50	\$50 Bull Riding _____
_____ \$40	_____ \$40	_____ \$40	\$40 Steer Wrestling _____
_____ \$40	_____ \$40	_____ \$40	\$40 Calf Roping _____
_____ \$40	_____ \$40	_____ \$40	\$40 Goat Tying _____
_____ \$40	_____ \$40	_____ \$40	\$40 Breakaway _____
_____ \$40	_____ \$40	_____ \$40	\$40 Pole Bending _____
_____ \$40	_____ \$40	_____ \$40	\$40 Barrel Racing _____
_____ \$50	_____ \$50	NONE	Cattle Cutting _____
_____ \$ 50	_____ \$50	NONE	Reined Cow Horse _____
_____ \$40	_____ \$40	_____ \$40	\$40 Team Roping _____

Header \_\_\_\_\_ Heeler \_\_\_\_\_

\*\*\*\*\*You must list your partner to enter!!!!!!!

MAKE CHECK OR MONEY ORDER TO: **TRIPLE CROWN RODEOS** TOTAL \$ \_\_\_\_\_

**Waiver of Liability:** Triple Crown Rodeo Committee and its sponsors will not be liable for any injuries to contestants or horses while participating in the rodeo, or on the rodeo grounds. We the parents of \_\_\_\_\_ (name of contestant) give the local hospital and the Physicians on the medical staff of the Hospital permission to administer NECESSARY EMERGENCY treatment for injuries he/she may incur while participating in the SDHSRA practice rodeo. We understand that each contestant must be and is covered by medical insurance. We here by release the hospital, physicians, medical staff and rodeo sponsors from all liability.

Contestant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that this student meets current grade and conduct requirements as set forth by the National High School Rodeo Association. The student must be passing in 70% of the classes they are taking to be eligible.

Signed: (Superintendent or Principal) \_\_\_\_\_

**SEND ENTRIES TO: MARY KAY SELL, PO BOX 298, MARTIN, SD 57551  
(605-441-0844) or (605 455-2120) evenings**

Questions concerning entries or information about the rodeo - contact:

Ross/Kellie Varilek      Geddes 605-680-1580 or 605-682-9083      *email* varilekbulls@midstatesd.net

Sara Grim      Burke 605-654-2288 Home or 605-830-0776      *email* grimranch@gwtc.net