

**SOUTH DAKOTA HIGH SCHOOL RODEO
HURON PRACTICE RODEO ENTRY FORM**

**All around saddle for boys and girls. (Must be entered both days)
\$15.00 per event per day.**

MAY 3 & 4, 2008: Performance Starts: 12:00 noon CDT Saturday & 11:00 AM Sunday

NAME _____
ADDRESS _____
2008 NHSRA CARD NO. _____ PHONE _____
SCHOOL YOU ATTEND _____
COWGIRL _____ COWBOY _____

EVENTS	SAT.	SUN.	PARENT or GUARDIAN SIGNATURE
___ BARRELS	_____	_____	_____
___ POLES	_____	_____	_____
___ GOAT TYING	_____	_____	_____
___ BREAKAWAY ROPING	_____	_____	_____
___ CALF ROPING	_____	_____	_____
___ STEER WRESTLING	_____	_____	_____
___ TEAM ROPING	_____	_____	_____

HEADER _____
HEELER _____
_____ \$TOTAL ****Entry fees will be reimbursed with medical or vet release forms/letters only.

Stalling and Camping information will be available at registration. Reservations prior to rodeo are not necessary. Stalls and camping slots will be on a first come first serve basis.

WAIVER OF LIABILITY

HURON PRACTICE RODEO COMMITTEE WILL NOT BE LIABLE FOR ANY INJURIES TO CONTESTANTS OR HORSES WHILE PARTICIPATING, OR ON THE RODEO GROUNDS.

We the parents or guardians of: _____ (name of contestant) give the local hospital, its Physicians and Medical Staff of the Hospital permission to administer NECESSARY EMERGENCY treatment for injuries he or she may incur while participating in the SDHS practice rodeos. We understand that each contestant must be and is covered by the medical insurance. We hereby release the local hospital, its physicians and medical staff and the RODEO COMMITTEE and SPONSORS from all liability.

CONTESTANT SIGNATURE _____

PARENTS OR GUARDIAN(S) SIGNATURE _____

NOTARY ACKNOWLEDGEMENT
SUBSCRIBED AND SWORN BY _____ (PARENTS OR GUARDIANS) BEFORE ME

THE _____ DAY OF _____, 2008.

SEAL _____ NOTARY PUBLIC SIGNATURE _____

NOTARY PUBLIC NAME (PRINTED) _____
MY COMISSION EXPIRES _____

I certify that this student meets current grade and conduct requirements as set forth by the National High School Rodeo Association. Student must be passing in 4 subjects, if student is enrolled in less than 4 subjects must be passing in all subjects.
SIGNED _____ (SUPERINTENDENT OR PRINCIPAL)

**Send entry to: Shirley Erickson, 6905 E Splitrock Circle, Sioux Falls, SD 57110
(605) 321-9937 between 6pm and 10pm Central Time**

ENTRY DEADLINE: APRIL 18, 2008