**8th District Idaho High School Rodeo Association**

**2020 Fall Rodeo Entry Form**

Contestant Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Address

*May enter one rodeo or multiple rodeos per sheet*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

School Grade

\*\*\*\****CURRENT REPORT CARD WILL NOT BE REQUIRED TO SEND WITH ENTRY FORMS – I WILL USE THE ONE SENT WITH MEMBERSHIPS FOR THE FALL RODEOS ONLY. SPRING RODEOS WILL REQUIRE NEW REPORT CARDS WITH ENTRIES***\*\*\*\*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Rodeo** | **Date** | **Time** | * all that apply   **Entry**  **Due Date** | Bareback Riding | Saddle  Bronc Riding | Bull Riding | Tie Down Roping | Steer Wresting | Pole Bending | Barrel Racing | Goat Tying | Breakaway  Roping | Team Roping  Header | Team Roping  Heeler | Team Roping is enter once  $24 per man  Team Roping Partner |
| Grace | Aug 22 | 10:00 am | 8/7/20 |  |  |  |  |  |  |  |  |  |  |  |  |
| Grace | Aug 22 | 1 hr after JH | 8/7/20 |  |  |  |  |  |  |  |  |  |  |  |  |
| Montpelier | Aug 29 | 10:00 am | 8/14/20 |  |  |  |  |  |  |  |  |  |  |  |  |
| Montpelier | Aug 29 | 1 hr after JH | 8/14/20 |  |  |  |  |  |  |  |  |  |  |  |  |

**EACH ENTRY FORM MUST BE NOTARIZED, SIGNED BY SCHOOL OFFICIAL, BOTH PARENTS & CONTESTANT, & INCLUDE PAYMENT TO BE ACCEPTED!**

*VENMO PAYMENT @ EighthDistrict-IHSRA*

**ENTRIES MUST BE RECEIVED BY DUE DATE (EMAIL ONLY!)**

*TO: ihsrad8@yahoo.com*

*QUESTIONS CALL LYNETTE SMITH AT 208-847-5486*

Number of events entered \_\_\_\_\_\_\_\_\_ Total of C:\Program Files\Microsoft Office\MEDIA\OFFICE12\Bullets\BD21301_.gif’s

Entry Fee Per Event x \_\_\_$24\_\_\_

**Total fees due w/ entry form = \_\_\_\_\_\_\_\_\_**

**LATE ENTRIES WILL BE ACCEPTED WITH A $10 LATE FEE PER EVENT, UNTIL 7 PM, 1 WEEK AFTER DUE DATE, NO EXCEPTIONS!**

**PARENTS & CONTESTANTS – PLEASE READ & SIGN:**

I understand that (1) failure of a contestant or his or her parents to follow the chain-of-command or (2) violation of any NHSRA rule or ground rule shall result in probation or immediate disqualification of the contestant and (3) any returned checks will result in a cash only basis, $25 returned check fee, and contestant will not be allowed to compete until taken care of.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’ssignature Date Parent’s signature Date Contestant’s Signature Date

**CERTIFICATION OF ELIGIBLILTY:** *I certify that this student has a minimum of a 2.0 GPA and is in good standing with the school.*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

School Official Position or title Date

**WAIVER OF LIABILITY: MUST BE SIGNED BY CONTESTANT AND BOTH PARENTS AND BE NOTARIZED.**

We the parents of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give the nearest hospital permission to administer necessary emergency treatment for injuries he or she may incur while participating in the 8th District high school rodeos. We understand that each contestant must be, and is covered by medical insurance. We hereby release the hospital, physicians, ambulance service, EMTs, rodeo sponsors, and stock contractors from all liability. We further do hereby release the 8th District IHSRA, its officials, directors, and volunteers, from all liability for injuries he/she, and/or property may sustain.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s signature Date Parent’s signature Date Contestant’s Signature Date

On this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_­­­2020, before me personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

to me known to be the persons who have executed the foregoing release and acknowledged they signed same as their free act and deed.

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notary Public \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_