



High School Rodeos of BC
MEMBER OF NATIONAL HIGH SCHOOL RODEO ASSOCIATION



JUNIOR DIVISION ~ FINALS ENTRY FORM – FINALS 2017

CONTESTANT NUMBER _____ NHSRA NUMBER _____

THIS ENTRY WILL NOT BE ACCEPTED UNLESS IT IS COMPLETE IN FULL WITH ALL SIGNATURES AND FEES

CONTESTANT NAME _____ PHONE _____

ADDRESS _____ POTENTIAL CODE _____

SCHOOL _____

ADDRESS _____ POSTAL CODE _____

<u>GIRLS EVENTS:</u>	<u>X</u>	<u>FEE</u>	<u>SIGNATURE OF PARENT OR GUARDIAN</u>
Barrel Racing	_____	\$50.00	_____
Pole Bending	_____	\$50.00	_____
Breakaway Roping	_____	\$50.00	_____
Goat Tying	_____	\$50.00	_____

<u>BOYS EVENTS:</u>	<u>X</u>	<u>FEE</u>	<u>SIGNATURE OF PARENT OR GUARDIAN</u>
Ty Down Roping	_____	\$50.00	_____
Chute Dogging	_____	\$50.00	_____
Junior Bull Riding	_____	\$50.00	_____
Breakaway Roping	_____	\$50.00	_____
Goat Tying	_____	\$50.00	_____
BAC Saddle Bronc	_____	\$50.00	_____
BAC Bareback	_____	\$50.00	_____
Team Roping (Boys or Girls)	_____	\$50.00	_____
Name of Team Roping Partner	_____		_____
Ribbon Roping (Boys or Girls)	_____	\$50.00	_____
Name of Ribbon Roping Partner	_____		_____

ASSOCIATION/CENTRAL ENTRY FEE \$ ~~10.00~~ Not Applied at Finals

TOTAL FEES DUE:

1.) I certify that this student meets the National High School Rodeo Association's **GRADE AND CONDUCT** qualifications (passing grades in 70% of all classes taken). **CONDUCT** (is in attendance and behaving in a satisfactory manner). This student was under the age of 16 at the first of the High School Rodeo year and has been enrolled in the 6th, 7th, or 8th grade, 2016/2017. **PLEASE CIRCLE THE STUDENTS GRADE: 6TH 7TH 8TH**
PLEASE SIGN IN INK. PLEASE USE THE SCHOOL SEAL BELOW.

Signature of Supt., Principal, Designee, or National Director **Printed Name and Title**

2.) We the undersigned, in consideration of the contestant being granted the right and privilege to contest and participate in the High School Rodeos of BC, have read the above and state the above information is correct. We hereby give permission for the contestant to enter and participate in the said rodeo. We also certify that the contestant is properly covered by a medical insurance plan operating in the Province or British Columbia. A student competing in this rodeo CANNOT refuse medical attention in the case of injury except by negligence.

BC Medical Plan Number **Medical Alert**

Signature of Parent or Guardian **Signature of Contestant**

3.) We the parents of _____ give the **WILLIAMS LAKE HOSPITAL** and the Physicians on the Medical Stall of the Hospital permission to administer NECESSARY EMERGENCY treatment for the injuries he or she may incur while participating in the 2017 BC JUNIOR HIGH SCHOOL RODEO FINALS. We understand that each contestant must be and is covered by medical insurance. We hereby release the WILLIAMS LAKE HOSPITAL physicians on the medical staff, and the Rodeo sponsors/producers from all Liability except for negligence.

Signature of Parent or Guardian
** PARENT OR GUARDIAN MUST SIGN FOR EACH EVENT ENTERED, REGARDLESS OF AGE OF CONTESTANT **