



HIGH SCHOOL RODEOS OF BRITISH COLUMBIA
Email Sanction Approval form to:
hsrofbsecretary@gmail.com

BCHSRA SANCTION FORM JUNIOR DIVISION

NAME OF RODEO _____

LOCATION (**PHYSICAL ADDRESS**) _____

DATES AND START TIMES _____

OPTIONAL EVENTS: MAY ALSO BE HELD SEPARATELY BUT IN CONJUNCTION WITH YOUR RODEO

PLEASE CIRCLE YES OR NO

SHOOTING _____

ADDITIONAL INFO i.e. STALLS/CAMPING/FUNDRAISERS _____

COMMITTEE CONTACT _____

PHONE/EMAIL _____

CIRCLE ONE: CO-APPROVAL NORTH SOUTH

EMERGENCY MEDICAL FACILITIES ON SITE: YES OR NO TRANSPORTATION: YES OR NO

NUMBER OF EMERGENCY FIRST AID PEOPLE AT RODEO/ FIRST AID CERT.LEVEL _____

NAME & ADDRESS OF CLOSEST HOSPITAL, _____

BOYS EVENTS	FEEES	GIRLS EVENTS	FEEES
TIE DOWN ROPING		BARREL RACING	
CHUTE DOGGING		POLE BENDING	
BAC BAREBACK		BREAKAWAY ROPING	
BAC SADDLE BRONC		GOAT TYING	
GOAT TYING			
BREAKAWAY ROPING			
JR BULL RIDING		STEERS OR BULLS USED	
OPEN EVENTS			
RIBBON ROPING			
TEAM ROPING		PARTNER/HEAD OR HEEL	
SMALL BORE .22			
TRAP			

REGIONAL DIRECTOR SIGNATURE AND DATE _____

BC SANCTIONING FEE @ \$100 PER DAY TO BE PAID BY COMMITTEE

PLEASE SCAN AND EMAIL THIS FORM TO THE BCHSRA SECRETARY NO LESS THAN 60 DAYS PRIOR TO YOUR RODEO DATES, UPON APPROVAL IT WILL BE RETURNED TO COMMITTEE. ***** PLEASE SCAN – NO PICTURES *****

AMENDMENTS WILL ONLY BE ACCEPTED UP TO 30 DAYS PRIOR TO EVENT, UNLESS CIRCUMSTANCE BEYOND CONTROL.

hsrofbsecretary@gmail.com

HSR OF BC OFFICE USE ONLY

DATE RECEIVED: _____

DATE TO BOD: _____

DATE APPROVED: _____

DATE TO ADMIN: _____

DATE TO COMMITTEE: _____

DATE TO WEBSITE: _____