



PLEASE PRINT

2015 TRIPP COUNTY 4-H RODEO OFFICIAL ENTRY BLANK

JULY 17, 2015

Rodeo Start time 10:00 AM

Tripp County Fairgrounds, Winner, SD 57580

Large Arena Will Start With Rough Stock Events

ENTRY DEADLINE – JULY 7, 2015

Postmarked NO LATER than July 7, 2015

- NO SPECTATOR GATE ADMISSION -

- PROGRAM CHARGE: \$1.00 EACH -

NAME _____ BIRTH DATE _____ AGE Jan 1, 2015 _____
ADDRESS _____ (street/box) (city) (state) (zip) (phone)
COUNTY _____ 4-H CLUB _____ LEADER _____

NOTICE: State Finals entry forms must be postmarked by 05/01/2015

MAIL ENTRIES TO: Penny Heenan, 530 Lincoln St., Winner, SD 57580-2038; email address: trippco4hrodeo@yahoo.com
Phone # 605-842-0985 or 605-840-1354 Make Check Payable to: TRIPP COUNTY 4-H RODEO.

Incomplete entries will not be accepted.

Contestant Cards Will Not Be Sent

Check the events you wish to enter and enclose the entry fee.

() Ambassador Contest FEE: \$12.00 PARENT/GUARDIAN SIGNATURE _____

4-H Member ID # _____

JUNIOR BOYS

Table with 3 columns: Event, Fees, Parent/Guardian Signature. Rows include Flag Race, Cattle Riding, Goat Tying, Breakaway Roping.

JUNIOR GIRLS

Table with 3 columns: Event, Fees, Parent/Guardian Signature. Rows include Pole Bending, Barrel Racing, Goat Tying, Breakaway Roping.

SENIOR BOYS

Table with 3 columns: Event, Fees, Parent/Guardian Signature. Rows include Bareback Riding, Bull Riding, Saddle Bronc Riding, Steer Wrestling, Calf Roping, Dally Team Roping.

SENIOR GIRLS

Table with 3 columns: Event, Fees, Parent/Guardian Signature. Rows include Pole Bending, Barrel Racing, Goat Tying, Breakaway Roping, Ribbon Roping, Dally Team Roping.

(Please enter with a roping partner) List Header Name: _____

List Heeler Name: _____

Surcharge \$2.00
TOTAL FEES: \$ _____

◆ AMBASSADOR CONTEST: 8:00 A.M. Friday, July 17th. Must be entered in one other event. Read event rules in SD 4-H RODEO GUIDE. Photo MUST accompany entry. JUNIOR AND SENIOR AMBASSADOR CONTESTANT - EXTEMPORANEOUS SPEECH WILL BE REQUIRED. Ambassador Contest Coordinator–Geneice Gebhart, (605)842-2358

CONTESTANTS WILL FOLLOW GENERAL RULES ACCORDING TO CURRENT 4-H RODEO GUIDE

This contestant is covered by the following:

- () American Income Life Policy #12000
() A waiver showing other adequate insurance on file at our resident County Extension Office

PARENTS OR GUARDIANS MUST READ AND SIGN THE FOLLOWING CONSENT: We the parents or guardians, and I the 4-H member, have read the rules and complete entry. As parents or guardians, we hereby consent to our child's participation in the Tripp County 4-H Rodeo at Winner, SD on the 17th of July, 2015. We do hereby release the 4-H Rodeo Committee and/or its agents and the stock contractor or his agent from any and all liability for damages whatsoever that may occur to our child or our child's horse or mount, while competing in said show or while enroute to or from the Rodeo Grounds. We give the local hospital or clinic and physicians or ambulance attendants permission to administer necessary treatment and release all the above persons from liability.

Parent or Guardian Signature

4-H Rodeo Contestant Signature

I do certify that this 4-H member is in good standing and meets the conduct qualifications of our State 4-H Association.

4-H Youth Program Advisor



PLEASE PRINT

**MINOR RELEASE & WAIVER OF LIABILITY & INDEMNITY AGREEMENT ON THE BACK
PARENTS OR GUARDIANS AGREEMENT OF WAIVER OF LIABILITY
INDEMNIFICATION AND MEDICAL RELEASE**

Under South Dakota Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risk of equine activities, pursuant to SDCL 42-11-1.

The undersigned parent and natural guardian or legal guardian does hereby acknowledge that he/she is aware of the dangers involved in participating in 4-H Rodeo; and that rodeos are dangerous and will expose him/her to substantial and serious risk of property damage and/or personal injury or death.

Said undersigned parent and natural guardian or legal guardian does hereby represent this he/she is, in fact, acting in such capacity and agrees on behalf of the participant and his/her executors, administrators, heirs, next of kin, successors, and assigns, to:

- a. waive, release and discharge from any and all liability for participant’s death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to participant and his/her estate, the State of South Dakota, and its officers, agents, employees, 4-H volunteers, stock contractors, arena owners and arena officials; and
- b. indemnify and hold harmless the State of South Dakota, and its officers, agents, employees, 4-H volunteers, stock contractors, arena owners and arena officials from and against any and all liabilities and claims made by other individuals or entities as a result of participant’s participation or actions during this activity or event.

The undersigned further consents to and authorizes medical treatment to the participant, which may be deemed advisable in the event of injury, accident or illness during this event. The undersigned further understands that he/she is financially responsible for any such medical treatment.

This release and waiver shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

Parents or guardians and 4-H Rodeo Contestants must sign the following consent: We, the parents or guardians and 4-H Rodeo Contestants having read the rules and complete entry, herewith consent to the contestants participating in the Tripp County 4-H Rodeo on the 17th of July, 2015, at Winner, South Dakota, and do hereby release the Tripp County 4-H Rodeo & Committee and/or agents from any or all liability for damage whatever that may occur to the 4-H Rodeo Contestant or the 4-H Rodeo Contestant’s horse or mount, while competing in said show or while enroute to and from the rodeo grounds.

I, the undersigned, acknowledge that I have read and understand the above Release.

Name of Minor _____ Date of Birth _____

Signature _____ Date _____

Name of Parent or Guardian _____

Signature _____ Date _____