

**Mississippi High School State Finals Rodeo
June 5 - 9, 2018
Hattiesburg, MS**

Forest Co. Multi Purpose Center

PLEASE TYPE OR PRINT, FILL IN COMPLETELY & SIGN! DO NOT STAPLE PAYMENT TO THIS FORM!

NAME: _____ AGE: _____ GRADE: _____

ADDRESS: _____ SCHOOL: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____ NHSRA CARD NUMBER: _____

PARENTS MUST SIGN BY EACH EVENT ENTERED OR ENTRY FORM WILL BE RETURNED!!!!

(X) BOYS EVENTS (FEES) (Parents Signature)

(X) GIRLS EVENTS (FEES) (Parents Signature)

_____ BC Boys Cutting \$70.00 _____
_____ BB Bareback Riding \$50.00 _____
_____ SB Saddle Bronc \$50.00 _____
_____ BR Bull Riding \$50.00 _____
_____ CR Calf Roping \$50.00 _____
_____ Steer Wrestling \$50.00 _____
_____ TR Team Roping \$50.00 _____

_____ Girls Cutting \$70.00 _____
_____ BA Barrel Racing \$50.00 _____
_____ PB Pole Bending \$50.00 _____
_____ GT Goat Tying \$50.00 _____
_____ BK Breakaway Roping \$50.00 _____

I am a HEADER _____ HEELER _____ mark one.

PARTNERS Name _____

_____ Reined Cow Horse \$70.00 _____

_____ Reined Cow Horse \$70.00 _____

_____ **X Security Fee \$10.00 (ALL CONTESTANTS)** _____ **X MAIL-IN'S ENTRY FEE \$5.00 (ALL CONTESTANTS)**

"We the parents or guardians of (name of contestant) give the LOCAL HOSPITAL and the Physicians on the Medical Staff of the Hospital permission to administer NECESSARY EMERGENCY treatment for injuries he or she may incur while participating in the MHSRA State Finals Rodeo. We understand that each contestant must be and is covered by medical insurance. We hereby release the LOCAL HOSPITAL, Physicians on the medical staff, and the Rodeo Sponsors from all Liability.
SIGNED: _____

(Father)

(Mother)

(Contestant)

_____ **x** If you would like all your events on one night. (this is NOT GUARANTEED)

If you participate in more than one event and you would like to have your events split, please list below how you would like them to be split (This is NOT GUARANTEED)

DO NOT SPECIFY WHAT NIGHTS YOU WANT YOUR EVENTS. You may list what events you would like to have together on line below

Mail to: MHSRA **Make checks & money orders payable to MHSRA**

P.O. Box 454

Watson, La 70786

*****ALL ENTRIES MUST BE POSTMARKED NO LATER THAN THURSDAY, May10, 2018**

Checklist (Please put **X** by enclosures & the amount of \$ enclosed for grounds fee and stalls)

_____ Grounds Fee _____ No. of horses X \$15.00 per horse = \$ _____

_____ Stall Fee _____ No. of stalls needed X \$30.00=\$_____

_____ \$10.00 Security Fee

_____ \$5.00 Mail In Entry Fee

_____ Total Fees Enclosed \$_____

_____ Transcript _____ School grading scale _____ **COPY** of Current Coggins ---- **WILL NOT MAKE**

COPIES!

T-Shirt Size _____ Small _____ Medium _____ Large _____ X-Large

ENTRY FORM WILL BE CONSIDERED INCOMPLETE UNTIL ALL ENTRY FEES, GROUND FEES, MANDATORY \$200 AD MONEY, \$200

RAFFLE TICKET MONEY ARE PAID, AUCTION ITEM IS TURNED IN, COGGINS PAPERS & TRANSCRIPTS ARE SUBMITTED. HAVE

TRANSCRIPTS SENT AS SOON AS AVAILABLE & MAKE SURE THEY ARE SENT IN AN OFFICIALLY SEALED SCHOOL ENVELOPE FROM THE SCHOOL.