



**UTAH HIGH SCHOOL RODEO ASSOCIATION  
MEMBERSHIP - JR HIGH DIVISION  
QUALIFYING RODEO ENTRY FORM  
FOR COWGIRLS**



UHSRA BACK # \_\_\_\_\_

CONTESTANT (APPLICANT) NAME: \_\_\_\_\_  
 CLUB: \_\_\_\_\_ SS #: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ HOME PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_  
 CITY, ST ZIP: \_\_\_\_\_ PARENT'S CELL NUMBER: (\_\_\_\_) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ YEAR(S) IN UHSRA: 1 2 3 4  
 (Include this year; however, do not include Junior High Division)  
 BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_ SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_  
 MOTHER'S NAME: \_\_\_\_\_ FATHER'S NAME: \_\_\_\_\_  
 (PLEASE PRINT) (PLEASE PRINT)

SIGNATURE OF BOTH PARENTS (If only one, must state FULL CUSTODY, GUARDIAN or DECEASED) MUST BE AT THE RIGHT OF EACH EVENT ENTERED

**(PARENTS SIGNATURES on lines next to each event of contestant participation)**

BARRELS	X
	X
POLES	X
	X
GOAT TYING	X
	X
BREAKAWAY ROPING	X
	X
RIBBON ROPING	X
	X
TEAM ROPING	X
	X
LIGHT RIFLE .22	X
	X

**UTAH MEMBERSHIP DUES \$25.00**

**COMPLETE ALL BLANKS AND SIGNATURES AND  
HAVE ENTRY FORM NOTARIZED**

I do certify this student meets all Utah High School Rodeo Association's grade and conduct qualifications of a 2.0 grade point average with no more than one F at the ending of the current term. I am aware that I may contact the UHSRA state secretary if I feel that there are conduct problems that should prohibit this student from participating in UHSRA activities at any time during the school year.

SIGNED: \_\_\_\_\_  
 X \_\_\_\_\_  
 PRINCIPAL OR DESIGNEE, OR NATIONAL DIRECTOR

*Before me, the undersigned authority, a notary public in and for said county and state, on this day personally appeared the above named parents/guardians of applicant, and applicant who have signed the foregoing application for entrance in the Utah High School Championship Rodeo's qualifying rodeos for the state of Utah, who upon their oath disposes and says that: We hereby give our permission for said applicant to participate in said rodeos and agree to hold all Utah qualifying rodeos, the UHSRA and all other persons and organizations blameless from any liability whatsoever by reason of his/her participating in said rodeos; we, the undersigned parents or guardian(s) of the above named applicant, and the applicant give the local hospital and the physicians on the medical staff of the hospital permission to administer the necessary emergency treatment for injuries he/she may incur while participating in the UHSRA qualifying rodeo(s) and hereby release the local hospital and physicians on the medical staff, any rodeo sponsors, organizations or other persons of all liability.*

X \_\_\_\_\_  
 CONTESTANT

X \_\_\_\_\_  
 FATHER

X \_\_\_\_\_  
 MOTHER

The State of Utah County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_

day of \_\_\_\_\_, AD 20\_\_\_\_\_

My Commission Expires: \_\_\_\_\_

X \_\_\_\_\_  
 NOTARY

\*A copy of current report card MUST accompany this application\*