DISTRICT	#
Sent By:	
Phone:	
Email:	

2019-2020 JUNIOR HIGH RODEO APPROVAL FORM **CALIFORNIA HIGH SCHOOL RODEO ASSOCIATION**

PO Box 279, Arroyo Grande, CA 93421 (805) 441-2121 Email: secretarychsra@gmail.com



APPROVALS MUST BE <u>RECEIVED</u> BY STATE SECRETARY 60 DAYS PRIOR TO EVENT							
Check One: Ro	odeo:Clii	nic: School:					
Districts Sanctionir	ng This Rodeo as a	a Points Rodeo:					
Dates:		List Alternate Ra	ain Dates:				
Rodeo Secretary:			Phon	ne: ()			
	Officer Responsibl	е	Stock C	Contractor			
Name							
Street Address							
City, Zip							
Phone							
,		e Member and be on grou		·			
required	Arena/Location			earest Hospital			
Name							
Street Address							
City, Zip							
Name of Ambulance S Must be ALS rated Am	Service on grounds: bulance service per C	CHSRA Policy Manual! (I	unless prior	approval from the National Director)			
with the NHSRA Office	ce 30 days prior to t	<u>the event</u> . Please mak	ke sure you	ficate of Insurance MUST be on file or Treasurer has these dates on file ate of Insurance sent to the location			
List of Events: (Check Applicable) Boy's Goat Tying Chute Dogging Jr Bull/Steer Riding Tie Down Roping Boy's Breakaway Bareback Steer Riding Saddle Bronc Steer Riding			Pole b Girls (Girls B Team	l Racing bending Goat Tying Breakaway Roping Roping (boys/girls) In Roping (boys-girls)			

- Original Application to State, copy to be kept in District Files.

 <u>Application must be received by CHSRA State Secretary 60 days prior to event.</u>

OFFICE USE ONLY	Activity No
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