

White Mountain Apache Tribe 97th Annual WMAT Fair & Rodeo August 30, 2024 – 8:00 AM



All Indian Master's Rodeo Contestant Entry Form

(One form per contestant)

Contestant Name: Address:	City:	State:	Zip:	
Phone Number:				
All Indian Master's Rodeo – Please chec	k event(s) entering. – Friday, August 30, 2	024 – 8:00 AM		
40-49 Years Old - \$40 per event				
Bull Riding - Limit 20	Chute Dogging - Limit 15	☐ Tie I	Oown Roping - Limit 15	
☐ Ladies Barrel Racing – Limit 20	☐ Ladies Ribbon Roping - Limit 20	☐ Ladie	Ladies Breakaway - Limit 20	
Team Roping (1x) - \$80/tm - Limit 80	Team Roping (2x's) - \$80/tm - Limit 80	☐ Team Ropin	Team Roping (3x's) - \$80/tm - Limit 8	
50-59 Years Old - \$40 per event	_	_		
Wild Cow Riding - Limit 20	Tie Down Roping - Limit 15			
Ladies Barrel Racing – Limit 20	Ribbon Roping - Limit 20			
Team Roping (1x) - \$80/tm - Limit 80	Team Roping (2x's) - \$80/tm - Limit 80	☐ Team Ropin	ng (3x's) - \$80/tm - Limit 80	
60 years & Over - \$40 per event				
Team Roping (1x) - \$80/tm - Limit 80	☐ Team Roping -(2x's) \$80/tm - Limit 80	☐ Team Ropin	ng -(3x's) \$80/tm - Limit 80	
☐ Breakaway - Limit 25				
Header:	Header			
Heeler:				
	Ribbon Roping	Entry		
Header:	Roper:	•		
Heeler:				
Total Entry Fee:				
Admin Fee: \$20	Contestants	must stay in their ov	wn age category	
Late Fee (applies after 8/10): \$15				
Total Fees Owed:				
	Contestant Waiver			
Apache Tribe, its Committees, Employees, Pro	in the White Mountain Apache Tribe Rodeo events, omoters, Officials, Agents, Representative or Volun death which may be sustained by me or by any pro-	teers from legal actions who	atsoever arising out of or	
I am aware of the risks and hazards inherent up all risks of loss, damage, injury and including de	oon entering said premises and/or participating in a eath, to said property or me.	ny of these events, and I elec	et and voluntarily assume	
This release shall be binding upon me, my heirs, this waiver.	next of kin, executors and administrators and I ackno	owledge and represent that I	have authority to execute	
Participant Signature:		Date:		
	For Office Use Only		Rev. 07/02/24 plm	
Total fees paid: Fees received by:	Money Order #:	Receipt #	· · · · · · · · · · · · · · · · · · ·	