



KAUAI ALL GIRLS RODEO ASSOCIATION ENTRY

**ENTRIES DUE: Wednesday 1 WEEK Before Rodeo (11 Days Prior)**

**\*\*THERE IS NO HAND DELIVERED OR CASH ENTRIES**

**\*\*POSTMARK MONDAY BEFORE 1 WEEK BEFORE, NO ADD ON'S**

# of Go's	Event	Fee	Total
1	<b>3D Barrel Racing</b> 1st: _____ 2nd: _____		\$20 per horse \$ _____
1	<b>3D Pole Bending</b> 1st: _____ 2nd: _____		\$20 per horse \$ _____
2	<b>Team Roping (3 PARTNER MAXIMUM)</b> Sharing horse with _____ 1. _____ Head or Heel 2. _____ Head or Heel 3. _____ Head or Heel		\$25 per partner \$ _____ Odd Man Spots Will Be Asked For The Morning Of, and Partners will be drawn!
Options For Odd Man Volunteers (1) Pay and if you place you will receive a check (2) Do not pay and not receive a check.			
1	<b>Goat Tying (if stock available)</b> sharing horse with _____	\$25.00	\$ _____
Progressive After 1	<b>Break-a-way Roping</b> Sharing horse with _____	\$25.00	\$ _____

\*\*\*Membership fees \$100 annually; Family fee is \$150

\*\*\*Non Member rodeo fee is \$20 per rodeo

Total entry fees due	\$ _____
Arena Fee	\$ 10.00
*Membership Dues 1 x only	\$ _____
Office Fee	\$ 5.00
<b>Total Entry Fees enclosed</b>	<b>\$ _____</b>

**ENTRIES WILL NOT BE ACCEPTED AFTER THE WEDNESDAY A WEEK BEFORE RODEO**

**Payment Options:**  
**Venmo: @KAGRAKAUAI**  
**Check: Kauai All-Girls Rodeo Association**  
**NO CASH WILL BE ACCEPTED**

**Entry Options:**  
**Email To: KagraKauai@gmail.com**  
**OR**  
**Mail To:**  
**Debbie Bail at**  
**P.O Box 703 Lawai, HI 96765**  
**\*\*NO HAND DELIVER ENTRIES\*\***

**WAIVER**

I the undersigned hereby waves any claims against and releases and agrees to hold free and harmless each and all of the following in consideration for being allowed to participate in this rodeo event: the Kauai All Girls Rodeo Association, YMCA, CJM Stables, and any of their members, officers, and directors their heirs and assigns in the event of injury to me or my personal property during this rodeo or anything in any way connected with this rodeo.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone# \_\_\_\_\_

Email Address: \_\_\_\_\_

**Office Use Only:**

Arena fee \_\_\_\_\_ office fee \_\_\_\_\_ Late fee \_\_\_\_\_ amt paid \_\_\_\_\_ Ck# \_\_\_\_\_ Venmo \_\_\_\_\_  
 Membership fee \_\_\_\_\_ KRC Fee \_\_\_\_\_ amt due \_\_\_\_\_ amt refund/due \_\_\_\_\_

CONTESTANT NAME \_\_\_\_\_