Individual Events - Entry Sheet

Name of Rider _____

Age Group (Circle one)   1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Saddle Club _____

Name of Show Lane County Saddle Club   **Date** June 7 & 8, 2024

Mark Events Entered	Event Name	TIME	PLACE
	Lead Back Race		
	Two Barrel Flag Race		
	360 Eight Race		
	Pole Bending Race		
	Half 8 Race		
	Key Race		
	Reining		
	Walk Trot Horsemanship (1-7)		
	Western Lead Line (1-5)		
	Flying W Race		
	Polo Turn		
	Straight Barrels		
	Cloverleaf		

Kansas WESTERN HORSEMAN'S ASSOCIATION INC

RELEASE
I hereby release the HOST CLUB of all Accidents or Lost of Equipment to the rider or the horse.

Contact Number or Email

_____   _____

Rescue Race - Entry Sheet

Name of Show <u>Lane County Saddle Club</u>   **Date** <u>June 7 & 8, 2024</u>

Name of Rider _____

Age Group (Circle one)   1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Rider _____

Age Group (Circle one)   1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Saddle Club _____

Kansas
WESTERN HORSEMAN'S ASSOCIATION INC

RELEASE
I hereby release the HOST CLUB of all Accidents or Lost of Equipment to the rider or the horse.

_____

Contact Number or Email

_____

TIME_____   **PLACING**_____

Western Relay - Entry Sheet

Name of Show Lane County Saddle Club   **Date** June 7 & 8, 2024

Name of Rider _____

Age Group (Circle one) 1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Rider _____

Age Group (Circle one) 1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Rider _____

Age Group (Circle one) 1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Rider _____

Age Group (Circle one) 1-9   10-13   14-17   Women   Sr. Women   Men   Sr. Men

Name of Saddle Club _____

Kansas WESTERN HORSEMAN'S ASSOCIATION INC

RELEASE
I hereby release the HOST CLUB of
all Accidents or Lost of Equipment to
the rider or the horse.

_____

Contact Number or Email

_____

TIME_____   **PLACING**_____