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 Leoti Rough Riders

_____**Date**___June 15 & 16, 2024

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



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 Leoti		Date June 15 & 16, 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 1	L0-13	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_____

Pair Sack - Entry Sheet

Name of Show Leot	w Leoti Rough Riders					DateJune 15 & 16, 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 Saddle Club									



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 LeO	ne of Show Leoti Rough Riders					June 15 & 16, 2024				
Name of Pider										
Name of Rider						M	Gu Mar			
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										
					<u> </u>		<u> </u>			
Age Group (Circle one)	1-9	10-13	14-17	Women	Sr. Women	Men	Sr. Men			
Name of Saddle Club										



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

Contact Number or Email