Events - Entry Sheet

Name of Rider **Rider #**

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

Name of Saddle Club

Name of Show **Rocking S** **Date:** **5/9-10/2026**

Mark Events Entered	Event Name	Time	Place
	Lane Barrels		
	Top and Turn		
	Speed Barrels		
	Flag Race		
	Spur Race		
	Pole Bending Race		
	Half 8 Race		
	Key Race		
	Arena Race		
	Two Barrel Flag Race Left or Right		

Kansas WESTERN HORSEMAN'S ASSOCIATION INC

RELEASE

I hereby release the **Rocking S**
of all Accidents or Lost of Equipment to the rider or the horse.

Contact Number or Email