

Devils Cowhide - Entry Sheet

Name of Show **Bull City Roughriders** **Date:** **10-Jun-26**

Name of Rider

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

Name of Rider

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

Name of Saddle Club



RELEASE

I hereby release the **Bull City Roughriders**
of all Accidents or Lost of Equipment to the rider or the horse.

Contact Number or Email

Time _____

Placing _____