

82nd Annual Tohono O'odham Nation Rodeo & Fair O'odham Wapkial Ha-Tas All Indian Rodeo

February 1 & 2, 2020

CONTESTANT ENTRY FORM



Mail in Entries Open: November 18, 2019 **Entries Must Be Post Marked by:**

Saturday, January 18, 2020 Include - Entry Form(s)/Waiver(s) & Payment *Money Orders/Cashier's Checks Only*

"TEAM EVENTS MUST HAVE FULL TEAM PAYMENT ENCLOSED OR PAYMENT WILL NOT BE ACCEPTED"

Mail Entries To: Tohono O'odham Nation Rodeo Attn: Treasury

P.O. Box 837 Sells, Arizona 85634

Walk In Entries Open/Close

November 26, 2018 - January 17, 2019 Tohono O'odham Nation Treasury Department 9AM - 4PM M-F daily

OR Debit payment over the phone: 520-383-1800 x2453, 2466, 2464 entry form must be emailed to cashieroffice@tonation-nsn.gov or faxed to 520-383-3263 prior to calling in payment.

LAST DAY TO WALK-IN - Saturday, January 25, 2020 @ 9AM - 3PM @ Tohono O'odham Nation's Treasury Department "THERE WILL BE A \$20 LATE FEE"

Name:	Tribe				
Address:		City:	Sta	nte:	Zip
	Con	tact Number:			
(This is required for payout)					
() Bareback \$100 () Steer wrestling \$100 () Ladies Barrel Racing \$100	()†Calf ropin	onc \$100 ng \$100 eakaway \$100	() Team Rop	ing \$200/Team	·
(ng \$200 per team			,
Header:					_\$200
Header:					
Header:		Heeler:			_\$200
	Ladies Team R	oping \$200 per te	am (may enter 3X	x)	
Header:		Heeler:			_\$200
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Total Fees Enclosed: \$	(No Refu	nds. Except with an acc	eptable Doctor/Veteri	nary Note)	
Western attire will be strictly enf	orced for all contes	tants and helpers			
,,, escending weather 1, and so seemeding control	01000 101 011 001100	WAIVER			
n consideration of being allowe the receipt of such permission he sponsors and volunteers from all ncluding death which may be supremises.	ereby acknowledg	ged, the undersign atsoever arising ou	ed hereby release It of or related to	s the Tohono O any loss, damag	odham Nation, its e, or injury,
am aware of the risks and haza elect and voluntarily assume al This release shall be binding upo represent that I have authority t	Il risks of loss, dam on me, my heirs, n	nage, injury and inc ext of kin, executo	cluding death, to s	aid property or	me.
am also aware that these prem	iises are alcohol ar	nd drug free!			
Participant	Date	Parent/ Guard	ian (Contestant unde	r 18 years of age)	Date
OFFICE USE ONLY Ca	ush/MO/Card	Γ	oB	SECRETARY	7