

NHSRA Western Legacy Series Application

State/Provincial Association: _____ National Director: _____

Name of Event: _____ Contact #: _____

Date(s) of Event: _____ Indoor or outdoor facility: _____

Facility & Location of Event: _____

Intended Geographical Reach of Event: _____

(the event will be open to all members, what States/ Provinces is your focus area?)

How will you utilize the \$10,000 grant at this rodeo? Please breakdown in detail how the money will be spent:

Will this event be live-streamed or have a videographer on-site? _____

If yes, who will be the videographer? _____

List all competition events that will be offered: _____

List any awards that will be given at this event: _____

List all sponsors and sponsorship detail for the event: _____

Please list price breakdown you will be charging for each of the following:

Entries: _____ Stalls: _____ Camping: _____ Golf Carts: _____

Whom to make check payable to: _____

I have read and agree to the NHSRA Western Legacy Series Guidelines. I acknowledge this is an application to produce an NHSRA Western Legacy Series Rodeo in my State/ Provincial Association.

X _____
National Director Signature

Date

