

2026 Sanction Rodeo Information

Sanction Fee \$300.00

Each rodeo committee must submit a copy of their PAID rodeo insurance (minimum of \$500,000) CPRA must be listed as additional insured on the certificate. *This certificate must be received in the State office 30 days before your rodeo.*

This document MUST be received in the CPRA office by February 28 - Form is considered late after April 1st - sanction and penalty fee is \$500.00

SANCTION FORM MUST BE COMPLETE IN ORDER TO BE POSTED IN THE CPRA CALENDAR.

Rodeo Name _____

Town _____ circle one

Performance Dates: _____ Time _____ AM PM

_____ Time _____ AM PM

_____ Time _____ AM PM

_____ Time _____ AM PM

Slack Date: _____ Time _____ AM PM

Committee Contact Person: _____

Mailing Address: _____

City/State/Zip _____

Best Phone Number: _____

Email Address _____

Rodeo Contact Person: (not necessary if same as above) _____

Mailing Address: _____

City/State/Zip _____

Best Phone Number: _____

Email Address _____

Stock Contractor: _____

Your committee and/or stock contractor need at least **9 (Nine)** helpers - be sure to discuss this with your stock contractor.

All extra activities - in the performance - must be pre-approved by the CPRA board, and listed in the CPRA rodeo calendar.
List activities below:

Your committee must notify the State Office as to when the extra activity will occur. Request must be submitted as an order of events listing.

The State Office will request co-sanctions with surrounding states, however any co-sanctioning done is with each states approval and in accordance with their rules. Co-Sanctions need to be requested on this form when it is sent to the state office. Please CHECK YOUR CO-SANCTION requests below.

KPRA (KANSAS)	NMRA (NEW MEXICO)	GCPRA (ARIZONA)	WRA (WYOMING)	UPRA (TEXAS)	OTHER (PLEASE LIST)

Day Sheets - are emailed to you the morning after call-backs

Best Email address for Day Sheets: _____

If you'd like the directions to your arena advertised please put that information here: _____

ADDED MONEY INFO

Added money per event (must be at least \$500):

OPEN TEAM ROPING & MIXED TEAM ROPING MUST HAVE \$500 ADDED PER SIDE

Total Added Money \$

ADDED MONEY PER EVENT (PLEASE FILL OUT BELOW)

BAREBACK	STEER WRESTLING	BREAKAWAY ROPING	TIE-DOWN ROPING	SADDLE BRONC	MIXED TEAM ROPING	OPEN TEAM ROPING	BARREL RACE	BULL RIDING
\$	\$	\$	\$	\$	\$	\$	\$	\$

NUMBER OF CONTESTANTS ALLOWED IN PERFORMANCE (PLEASE LIST BELOW - 6 MINIMUM - 12 MAXIMUM)

BAREBACK	STEER WRESTLING	BREAKAWAY ROPING	TIE-DOWN ROPING	SADDLE BRONC	MIXED TEAM ROPING	OPEN TEAM ROPING	BARREL RACE	BULL RIDING
#	#	#	#	#	#	#	#	#

All other awards: _____

LOCAL ENTRY INFORMATION

IF YOU ARE ALLOWING LOCAL ENTRIES - THIS MUST BE COMPLETE

Name of Person taking local entries: _____

Email address of person taking local entries: _____

Date(s) of entries: _____ Time - Open Time - Close

Phone Number: _____ Fax: _____

COMMITTEE INFORMATION - PLEASE MAKE SURE THIS IS COMPLETED!!!

Hotel Information: Committee must provide one room for the Rodeo Secretary and one room each for the judges.

These rooms are exclusive to the rodeo secretary and judges; they are separate from any agreement you have with the stock contractor. Give all information to the judges and/or secretary - Thank You

Hotel Name and Phone number: _____

NUMBER OF YEARS YOUR RODEO HAS BEEN IN EXISTENCE? _____

ANY SPECIAL EVENTS HELD WITH YOUR RODEO? _____

IMPROVEMENTS AT YOUR ARENA? _____

DO YOU HAVE STALLS AVAILABLE? IF SO WHO SHOULD WE CALL? _____

DO YOU HAVE OVERNIGHT PARKING?

Yes

No

Official use only

Date entries are to be taken:		Open/Close				Time:		
Date of call-backs:		Open/Close				Time:		
Sanction Fee	Date Received:							
Insurance Received:				Amount of check:		Check No.		

Colorado Pro Rodeo Association reserves the right to change (with committee approval) any of the above information to enhance your rodeo!

Please call or email the State office with any questions 719 647-2828 or cpooffice@gmail.com