



White Mountain Apache Tribe  
98<sup>th</sup> Annual WMAT Fair & Rodeo  
August 31 - September 1, 2025



All Indian Rodeo Contestant Entry Form

(One form per contestant)

Contestant Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

All Indian Rodeo Events \$100.00 per entry, team Roping \$200.00 per team, please check event(s) entering  
Sunday, August 31 - 1:00 PM & 6:00 PM – Monday, September 1<sup>st</sup> - Short Go 1:00 PM - Slack, Sunday, August 31<sup>st</sup> - 8:00 AM  
First to enter, last to compete. \$2000 added - \$4000 team roping – All Around Champion \$5000 & Saddle

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Bareback – limit 10          | <input type="checkbox"/> Tie Down Roping– limit 60      | <input type="checkbox"/> Ladies Barrel Racing–no limit     | <input type="checkbox"/> Bull Riding– limit 80 |
| <input type="checkbox"/> Saddle Bronc – limit 10      | <input type="checkbox"/> Steer Wrestling– limit 45      | <input type="checkbox"/> Ladies Breakaway Roping– limit 80 |  |
| <input type="checkbox"/> Team Roping (1x) – limit 125 | <input type="checkbox"/> Team Roping (2x's) – limit 125 | <input type="checkbox"/> Team Roping (3x's) – limit 125    |  |

Header: \_\_\_\_\_

Header: \_\_\_\_\_

Heeler: \_\_\_\_\_

Heeler: \_\_\_\_\_

Header: \_\_\_\_\_

Heeler: \_\_\_\_\_

Total Entry Fee: \_\_\_\_\_

Admin Fee: \_\_\_\_\_ \$30

Late Fee (applies after 8/8): \_\_\_\_\_ \$15

Total Fees Owed: \_\_\_\_\_

**Contestant Waiver**

In consideration of being allowed to participate in the White Mountain Apache Tribe Rodeo events, the undersigned hereby releases the White Mountain Apache Tribe, its Committees, Employees, Promoters, Officials, Agents, Representative or Volunteers from legal actions whatsoever arising out of or related to any loss, damage, or injury, including death which may be sustained by me or by any property in my possession or control, while in, on or upon the premises.

I am aware of the risks and hazards inherent upon entering said premises and/or participating in any of these events, and I elect and voluntarily assume all risks of loss, damage, injury and including death, to said property or me.

This release shall be binding upon me, my heirs, next of kin, executors and administrators and I acknowledge and represent that I have authority to execute this waiver.

Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**(If under 18 years of age, a Parent or Guardian must sign)**

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Office Use Only**

Rev. 0708/25 plm

Total fees paid: \_\_\_\_\_

Fees received by: \_\_\_\_\_

Money Order

#:

\_\_\_\_\_

Receipt #: \_\_\_\_\_