

# SOUTH DAKOTA TIMED EVENT CHAMPIONSHIP

**Aug 31 - Sept 1, 2024**  
**10AM Start Both Days**  
**South Dakota State Fairgrounds**  
**Huron, South Dakota**

Contestant Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Contestant Signature \_\_\_\_\_ Email Address \_\_\_\_\_

Parent or Legal Guardian (Print) \_\_\_\_\_

Parent or Legal Guardian Signature \_\_\_\_\_

It is the contestants obligation to read and understand the SDTEC rules and regulations. The SDTEC wavier must accompany this entry form to ensure registration. Please carefully read the rules and regulations for this event. Western attire is mandatory both in and out of the arena. **Only contestants ages 14-19 (by August 1, 2024) are eligible.** Contestants should be prepared to show proof of age. The SDTEC reserves the right to request a valid form of government issued identification.

**Each contestant may choose a maximum of 3 events.** All events are gender neutral. Points will be awarded based on times/placings. Averages will determine Event winners. Points will determine Timed Event Champion and Reserve Timed Event Champion. See rules and regulations for full details. One does not need to enter 3 events to win Championship titles, but is encouraged to for better odds. To be an Event winner or Timed Event Champion, one must compete in the specified events both days.

Calf Roping

Steer Wrestling

Team Roping

Header or Heeler

Partner

Breakaway Roping

Goat Tying

Barrel Racing

**ENTRY FEE OF \$315 FOR ALL CONTESTANTS, POSTMARKED BY 8/19/24.**

This fee is standard for every contestant and includes a maximum of three events 8/31/2024, same three events 9/1/2024, office and stock/eye charges. Please Make checks payable to **Eastern Dakota Rodeos LLC**

**\*\*Late entries will only be accepted until AUG 25, 2024 with \$50 late fee paid.\*\***

Number of Stalls Needed \_\_\_\_\_

Camping Spots Needed \_\_\_\_\_

Stalls to be paid for at SDTEC.

**Please do not send stall money with entries.**

**Mail Entries to:**  
 Eastern Dakota Rodeos, LLC  
 Michele Birkholtz  
 19332 424th  
 Willow Lake, SD 57278

[sdtimeventchampionship.com](http://sdtimeventchampionship.com)

**Entries are limited!**

Contestant spots filled on a first come, first serve basis.

**Don't delay, send your entries in now!**

[sdtimeventchampionship@gmail.com](mailto:sdtimeventchampionship@gmail.com)

SOUTH DAKOTA

# TIMED EVENT CHAMPIONSHIP

## Horse of the Championship

Contestant Name

Horse's Registered Name

Horse's Nickname

Horse's Age

Horse's Events Entered in the SDTEC

Owner of Horse

Relationship of Owner to Contestant

Short Bio About Horse (Optional)

**Horse of the Championship Entry Fee: \$10.**  
If preregistering, please enclose \$10 for complete registration. Thanks!

For Internal Use Only
Contestant Number _____
Horse Number _____

# WAIVER OF LIABILITY, IDENTIFICATION, AND MEDICAL RELEASE

I am aware of the dangers involved in participating in the SD Timed Event Championship on the South Dakota State Fair Grounds.

On Behalf of myself, my executors, administrators, heirs, next of kin, successors, and assign, I hereby:

- a. Waive, release and discharge the South Dakota State Fair, Eastern Dakota Rodeos, the State of South Dakota, and its officers, agents, and employees from any and all liability for participant's death, disability, person injury, property damage, property theft, or actions of any kind which may hereafter accrue to participant and his/her estate; and
- b. Indemnify and hold harmless the South Dakota State Fair, Eastern Dakota Rodeos, the State of South Dakota, and its officers, agents, and employees from and against any and all liabilities and claims made by other individuals or entities as a result of participant's participation or actions during the activity or event or use of any State Fair facility.
- c. Certify that I am signing in the capacity of either agent of principle of any party with an interest in the horse(s) and will bind those parties to this agreement.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, or illness during this activity or event.

This release and waiver shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I, the undersigned participant, acknowledge that I have read and understand the above release.

Owner/Participant

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

Print Name: \_\_\_\_\_

Parent/Guardian Signature (required if minor): \_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact Phone No: \_\_\_\_\_