



# Central Coast Classic

## Entry Form

**Rodeo Date: May 11, 2019**  
**RCR Arena Paso Robles, CA**  
 Rodeo Starts: 8:00 AM Large Arena  
 Small Arena: **8:00 AM Dummy Roping**  
 CHECKS WRITTEN TO: CCCA

**Entry Deadline: April 30, 2019**  
 Entry Secretary: Dawn Pearce  
 Email: cccaentry@gmail.com  
 Mail: 4433 Foxen Canyon Road  
 Santa Maria, CA 93454  
 Phone: (805) 714-9856

**Late Entries in Hand before May 3<sup>rd</sup> @ 4PM \$45**

Contestant Name: \_\_\_\_\_ Age (as of 1/1/19) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

LEADLINE 6 & UNDER \$10

Ribbon Jerking \$ \_\_\_\_\_

Pole Bending \$ \_\_\_\_\_

Barrel Racing \$ \_\_\_\_\_

Single Stake \$ \_\_\_\_\_

Keyhole \$ \_\_\_\_\_

Dummy Roping \$ \_\_\_\_\_

LITTLE BRITCHES (4-6) \$20

Ribbon Jerking \$ \_\_\_\_\_

Pole Bending \$ \_\_\_\_\_

Barrel Racing \$ \_\_\_\_\_

Single Stake \$ \_\_\_\_\_

Keyhole \$ \_\_\_\_\_

Dummy Roping \$ \_\_\_\_\_

PEEWEE (7-9) \$25

Goat Tying \$ \_\_\_\_\_

Pole Bending \$ \_\_\_\_\_

Barrel Racing \$ \_\_\_\_\_

Keyhole \$ \_\_\_\_\_

Dummy Roping \$ \_\_\_\_\_

Breakaway Roping \$ \_\_\_\_\_

JR./SR./Family Team Roping  
 Partner: \_\_\_\_\_ \$ \_\_\_\_\_

JUNIOR GIRLS (10-13) \$25

Goat Tying \$ \_\_\_\_\_

Pole Bending \$ \_\_\_\_\_

Barrel Racing \$ \_\_\_\_\_

Breakaway Roping \$ \_\_\_\_\_

JUNIOR BOYS (10-13) \$25

Goat Tying \$ \_\_\_\_\_

Breakaway Roping \$ \_\_\_\_\_

JUNIOR GIRLS & BOYS \$25

Steer Stopping \$ \_\_\_\_\_

SENIOR BOYS (14-17) \$25

Touch Calf Roping \$ \_\_\_\_\_

OR

Calf Roping \$ \_\_\_\_\_

Chute Dogging (10-17) \$ \_\_\_\_\_

Reprinting contestants checks will result in a \$5 fee per check

I hereby agree release CCCA, all members, and any other person(s) jointly, and/or individually, who may be associated in any way with the above named association for liability or

SENIOR GIRLS (14-17) \$25

Goat Tying \$ \_\_\_\_\_

Pole Bending \$ \_\_\_\_\_

Barrel Racing \$ \_\_\_\_\_

Breakaway Roping \$ \_\_\_\_\_

SENIOR GIRLS & BOYS \$25

Steer Stopping \$ \_\_\_\_\_

Team Roping (10-17) \$ \_\_\_\_\_

Partner: \_\_\_\_\_

Partner Roping as:

Header  Heeler

Ribbon Roping (10-17) \$25 \$ \_\_\_\_\_

Partner: \_\_\_\_\_

Partner will be:

Roper  Runner  Ghost  
 (Drawing for Ghost add \$5) \$ \_\_\_\_\_

JR./SR./FAMILY TEAM ROPING (10-17)  
 Partner: \_\_\_\_\_ \$ \_\_\_\_\_

Only Junior Pays \$25 Partner will be

Header  Heeler

**Non-Member Day Permit: \$35**  
(Only if Membership is not paid)

**Office Fee (Mandatory Fee) \$5**

**Late Fee dated after April 30<sup>th</sup> \$45**

damages resulting from this event. I authorize such medical attention as may be deemed necessary at my expense.

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

**Total:** \_\_\_\_\_