



**NATIONAL  
INTERCOLLEGIATE  
RODEO  
ASSOCIATION**

<b>OFFICE USE ONLY</b>	_____	_____
	<b>Region</b>	<b>Number</b>

# Application for Rodeo Approval

NATIONAL INTERCOLLEGIATE RODEO ASSOCIATION  
2033 Walla Walla Avenue • Walla Walla, Washington 99362

- 1) Complete both sides of this form. **PLEASE TYPE or PRINT CLEARLY.**
- 2) Provide Western Specialty Insurers, LLC with insurance form and monies OR enclose a signed Certificate of Insurance verifying that your school is providing its own liability insurance coverage listing NIRA as additional insured.
- 3) Indicate whether or not this rodeo will have established ground rules not covered or that deviate from the NIRA Rulebook.
- 4) **Send completed and signed application along with Certificate of Insurance and a copy of established ground rules to the FACULTY DIRECTOR in your region for approval.**
- 5) Unless prohibited by law or school policy the school(s) sponsoring the rodeo must allow the NIRA National Sponsors to exhibit and sample their products as per their contracts with the NIRA. The sponsoring school(s) will become ineligible to receive scholarship money from these sponsors if this guideline is not followed.
- 6) Club/School dues must be paid prior to approval of rodeo.
- 7) All stock contractors must be current NIRA members, **including sub contractors.**
- 8) All contract personnel subject to NIRA rules.
- 9) Complete back of application including injured animal conveyance.

**Be sure to include the Rodeo Application form, indication you have provided Western Specialty Insurers, LLC with insurance form and monies or Certificate of Insurance Rodeo Liability Insurance form, stock contractor application if not current, and copy of Established Ground Rules.**

**The above must be in the NIRA National Office *thirty (30)* days prior to the first performance of a scheduled Rodeo. Please refer to the NIRA rulebook.**

**A \$200 LATE FINE WILL BE STRICTLY ENFORCED IF..**  
**the completed application, insurance, and ground rules are received in the**  
**NIRA National Office after the thirty (30) day deadline. \$100 late fine for every subsequent year.**

School/Region Sponsoring Rodeo \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_  
 Address \_\_\_\_\_ Phone # \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
 Email \_\_\_\_\_

Location of Rodeo (arena) \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_

Dates of Rodeo \_\_\_\_\_

Please check one of the following: Long/Short Go-Round \_\_\_\_\_ 1 Head Round \_\_\_\_\_ Other\* \_\_\_\_\_

No. of Performances		No. of Slack	
Day _____	Time _____	Day _____	Time _____
Day _____	Time _____	Day _____	Time _____
Day _____	Time _____	Day _____	Time _____
Day _____	Time _____	Day _____	Time _____

\*Enclose separate explanation sheet.

**Insurance:** What type are you providing? (check one)  
 Purchasing through Western Specialty Insurers, LLC.  
 Providing own (If so, enclose a signed Certificate of Insurance verifying coverage)

**Ground Rules:** (Please indicate whether or not this rodeo will have established ground rules not covered or that deviate from the current NIRA Rule book)  
 Enclosed is a copy of ground rules to be used \_\_\_\_\_ No additional ground rules will be used \_\_\_\_\_

**Stock Contractor:** Please indicate the Stock Contractor of Record and if applicable, the Timed Event Contractor of Record. (All sub contractors must be current NIRA members & listed on an additional sheet if necessary.)

Company Name \_\_\_\_\_ Owner's Name \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ PRCA Member: Yes No (Check One) • If Yes, PRCA# \_\_\_\_\_  
 Email \_\_\_\_\_

**Timed Event Contractor of Record must be a current NIRA member.** Check here if the stock contractor of record is also the timed event contractor.  
**CONSULT THE RULEBOOK ON REQUIRED CATTLE NUMBERS.**

Company Name \_\_\_\_\_ Owner's Name \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ PRCA Member: Yes No (Check One) • If Yes, PRCA# \_\_\_\_\_  
 Email \_\_\_\_\_

**FOR OFFICE USE ONLY**

**Date Rec'd** \_\_\_\_\_

**Ground Rules** \_\_\_\_\_

**Injured Animal Conveyance** \_\_\_\_\_

**Club Member** \_\_\_\_\_

**S.C. Member** \_\_\_\_\_

**Timed Event Memb.** \_\_\_\_\_

**Insurance Date Paid** \_\_\_\_\_

**Signatures** \_\_\_\_\_

**Ambulance** \_\_\_\_\_

# NATIONAL INTERCOLLEGIATE RODEO ASSOCIATION

PLEASE TYPE or PRINT CLEARLY

Judges will be assigned through the Regional Faculty Director. The sponsoring school(s)/region must pay a minimum of \$200.00 per performance to each judge. **In addition, the sponsoring school(s)/region must pay each judge \$1 for each run in slack. The school must also provide a complimentary hotel/motel room for each judge.**

All NIRA rodeos must have a veterinarian on call, and name & phone number must be posted in rodeo office. Rodeo Committee must also have a plan for conveyance of injured animal from arena and follow up/treatment of injured Livestock after leaving the arena. Specify conveyance (use additional sheet if necessary): \_\_\_\_\_

## AMBULANCE SERVICE/CERTIFIED MEDICAL PERSONNEL

VETERINARIAN \_\_\_\_\_ Phone \_\_\_\_\_

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

ANNOUNCER \_\_\_\_\_ Phone \_\_\_\_\_

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

E-Mail \_\_\_\_\_

BULLFIGHTERS #1 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#2 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

TIMER \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

TIMER \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

RODEO SECRETARY \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

ENTRY PROCEDURE Phone Fax Email

Must be in by \_\_\_\_\_

Email address \_\_\_\_\_

To \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Entry fee per event \$ \_\_\_\_\_

Call or fax in

Office charges \$ \_\_\_\_\_

Time \_\_\_\_\_ Date \_\_\_\_\_

Stock charges \$ \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Other charges \$ \_\_\_\_\_

Draw outs

Date \_\_\_\_\_

Coach's Signature \_\_\_\_\_

Regional Faculty or Student Director Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

### ARE THE FOLLOWING COMPLETE AND ENCLOSED?

1. The completed application for Rodeo Approval • 2. A copy of established ground rules, if applicable  
4. Club membership is current? • 5. Stock contractors are current members? • 6. Injured Animal Conveyance