

**BRANDING CONTEST ENTRY FORM**

(Circle one please)

**CO-ED**

**OPEN**

**WOMEN'S**

Team ENTRY FEES:  
(Per team)

**\$560.00**

**\$600.00**

**\$560.00**



TEAM NAME: \_\_\_\_\_ CAPTAINS NAME: \_\_\_\_\_

TELEPHONE NUMBER \*\*\* (REQUIRED TO CONTACT TEAMS) \_\_\_\_\_

TEAM MEMBERS PLEASE PUT COMPLETE MAILING ADDRESSES

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_
- 4. \_\_\_\_\_  
\_\_\_\_\_

**CATTLE WILL BE FURNISHED BY THE ELKO COUNTY FAIRBOARD**

Substitute Members: Any substitutions must be listed at time of entry and substitutions must be made prior to start of eliminations.

\_\_\_\_\_  
\_\_\_\_\_

With my signature below, I hereby release and hold harmless the City of Elko, the County of Elko, and the Elko County Fair Board and their officers, directors, agents, and all persons connected with or participating in the Elko County Fair from any liability for any property damage or personal injury claim by me or my horse of any description arising out of the use of the premises while participating in, aiding in, or working on, these events.

**ALL TEAM MEMBERS (OR GUARDIANS) MUST SIGN**

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_ 4. \_\_\_\_\_

SUBSTITUTE MEMBER: \_\_\_\_\_

**ENTRY FEE OWED \$** \_\_\_\_\_

**CASH OR CHECK #** \_\_\_\_\_ **TOTAL PAID \$** \_\_\_\_\_

Make checks payable to: Elko County Fair Board  
Mailing Address if entry mailed: PO Box 2067 Elko, NV 89803