

Complete Form and Send To:

MHSRA State office
PO Box 264
Roy, MT 59471
Phone/Fax: (406) 464-2686
Email: mhsra@mhsra.com

CLINIC APPROVAL FORM

Qualifying Rodeo District Rodeo Clinic

Clinic Name Judy Myllmaki Barrel racing

CLINIC DATES May 31, June 1 Thursday + Friday

**Arena Name or Street Address Candee Land 35298 cr 131, Fairview MT
(must be filled in or NHSRA will not approve)

PERSON TO SUPERVISE Name Tanya Candee
Address 35298 Cr 131
Fairview MT
Phone 701.260.1847
Email tanya-peterson@hotmail.com

NEAREST HOSPITAL Name Sidney Health Center
(all information must be filled in completely)
Address 214 14th AVE SW
Sidney MT
Phone _____

STOCK CONTRACTOR Name _____

SPONSORING ORGANIZATION Candee Land

2 Day Clinic Limited to 15 riders
cost 400.00 - first 5 people to send deposits receive -50.00 off.
Y2 deposit due at sign up non refundable
total due May 10, 2018

stalls available
Camping available - no hook ups

Call Tanya 701.260.1847
text

NOTE: Committee must submit this completed approval form at least 60 days in advance to the MHSRA State Office before the clinic will be approved and sanctioned.