



# MISS RODEO CALIFORNIA

## Appearance Request Form

Name of Rodeo or Event \_\_\_\_\_

Rodeo Committee Chairman or Event Director \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Contact Person #1 \_\_\_\_\_ Title \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Contact Person #2 \_\_\_\_\_ Title \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Requested Dates of Appearance \_\_\_\_\_

Type of Promotional Activity \_\_\_\_\_

### REQUIREMENTS AND FEES

- Round trip airfare and/or automobile mileage at 40 cents per mile for any part of the trip.
- \$50.00 per day appearance fee.
- All meals and lodging for Miss Rodeo California during her stay.
- Receipts for any parking fees, meals, lodging, shuttle or taxi services will be submitted for payment following her appearance.

*Your signature on this Appearance Request Form constitutes a commitment on your part to host Miss Rodeo California at your rodeo or event as per the above requirements.*

Signature \_\_\_\_\_ Printed name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Please remit a copy of this form to:

Ellen Kleinbeck  
5962 Snowgrass Trail  
Riverside, CA 92509

Email: [eklein57@earthlink.net](mailto:eklein57@earthlink.net) phone/fax: 951-360-3761 cell phone: 909-816-4383