

Michigan's 43rd Statewide Small Bus Rodeo
in conjunction with
Michigan Public Transit Frontline Conference
Boyne Falls, Mich.
August 9, 2018

Rodeo Entry Form

Type or print all information. Do not leave blanks.

Organization Name : _____

Driver First and Last Name: _____

Street Address: _____

City, State, Zip: _____

Telephone Number: _____ Fax Number: _____ Email: _____

Sponsoring Agency address _____

Sponsoring Agency City _____ State _____ Zip _____

Check if this is driver's first year competing in the Michigan Statewide Rodeo (eligible for Rookie Award)

Entry Fee

Rodeo ____ \$50 Late Fee* ____ \$25

* Registrations received after 7/25/18 subject to the above late fee
Cancellations/refunds after 7/30/18 are subject to \$10 administrative fee

Method of Payment: Check VISA/MC # _____ Exp. Date _____

Make check payable to **MASSTrans**, 1050 Brockway, Boyne City, MI 49712

**Please Note: Registration limited to three participants per agency.
Registration will not be considered complete until payment is received.**

Deadline: July 25, 2018

Important: Drivers must take a mandatory written test on Thursday, August 9, 2017. Registration, drivers meeting and testing will be held at the Civic Center in the center of Boyne Mountain Resort. For those who need assistance, there is an option to taking the test orally as well. I request an Oral Test

I certify that the above named contestant (*must be completed by supervisor*):

- A. Has been employed as a paid or volunteer driver engaged in demand-response or regular-route service since June, 2017 (either for current employer or previous employer).
- B. Has not had a chargeable (avoidable) accident since June, 2017.
- C. Has not had a suspension from duties or any disciplinary action since June, 2017.
- D. **Supervisors (less than 50% driving) may not compete in the 2018 Rodeo.**

Spvr. Signature: _____ Title: _____ Date: _____

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Rodeo Entry Biography

PLEASE PRINT OR TYPE:

Name: _____ Agency: _____

City: _____ State: _____ T-Shirt Size _____

Please take a moment and tell us about yourself (e.g. How long have you been a driver, what do you like best about driving, how many children do you have, interesting facts about you, etc) in 30 words or less.

Check-in for drivers begins at :00am on Thursday, August 9, 2018 at the Civic Center at Boyne Mountain Resort. Drivers will receive registration information at that time. Registration includes Continental Breakfast and awards luncheon for participant. Staff/guests should use separate form to reserve lunch/banquet tickets.

**Please return registration and driver biography
(no later than July 25th) to:**

Jill Drury, Statewide Rodeo Chair
1050 Brockway
Boyne City, MI 49712
Email: jdrury@cctransit.org

For more information the Michigan Rodeo or for additional registration forms visit MASSTrans website at www.masstrans.org
Look for information the new Conference/Event App

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Volunteer Judge Registration

Boyne Mountain Resort, Boyne Falls, MI – August 9, 2018

Type or print all information. Do not leave blanks.

Business or Organization Name : _____
First and Last Name: _____
Street Address: _____
City, State, Zip: _____
Telephone Number: _____ Cell Number: _____ Email: _____

Check if this is your first year volunteering to work or rodeo judge

Please indicate if there's an obstacle(s) you'd like to judge or any area you'd like to volunteer at.

No preference

First Choice

Second Choice

T-Shirt Size _____

Important Information:

It is suggested that volunteers attend a Judge's Meeting Thursday, August 9, 2018 at 8:30am at the Civic Center at Boyne Mountain Resort. Instruction on judging the various obstacles will be given at that time.

Volunteer workers will receive a meal ticket for the awards luncheon to be held Wednesday afternoon after the conclusion of the rodeo event.

Volunteer Registration Deadline: July 25, 2018

Please complete and return to:

ROADEO

c/o Jill Drury

Charlevoix County Transit

1050 Brockway, Boyne City, MI 49712

jdrury@cctransit.org

For more information on Michigan Rodeo and Frontline Conference
or additional registration forms visit MASSTrans website at www.masstrans.org

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Agency Staff and/or Guest Registration
(non-volunteers)

Type or print all information. Do not leave blanks.

Business or Organization Name: _____

First and Last Name: _____

_____ Adult Luncheon ___ Child Luncheon. Age ___

First and Last Name: _____

_____ Adult Luncheon ___ Child Luncheon, Age ___

First and Last Name: _____

_____ Adult Luncheon ___ Child Luncheon, Age ___

First and Last Name: _____

_____ Adult Luncheon ___ Child Luncheon, Age ___

First and Last Name: _____

_____ Adult Luncheon ___ Child Luncheon, Age ___

Staff/Guest Meal Totals

Advanced Meal Ticket Purchase Deadline: July 25, 2018

Option 1	Child Awards Lunch (age 4-12)	_____ \$10 per ticket	total	\$ _____
Option 2	Adult Awards Lunch	_____ \$25 per ticket	total	\$ _____
			Total Due	\$ _____

Method of Payment

Check VISA/MC # _____ Expire Date _____ Security Code _____

Please make check payable to MASSTrans

Mail to:
ROADEO, c/o Jill Drury
Charlevoix County Transit, 1050 Brockway, Boyne City, MI 49712
jdrury@cctransit.org