



# Journeyman Team Entry Form

## 22nd Annual Texas Lineman's Rodeo

**Entry Deadline: May 18, 2018**

**Please Print Clearly**

Utility Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Rodeo Team Coordinator: \_\_\_\_\_

Cell # : \_\_\_\_\_ Email: \_\_\_\_\_

Journeyman #1, Team Captain; Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cell Phone # : \_\_\_\_\_

Email: \_\_\_\_\_

T-shirt Size: \_\_\_\_\_

Journeyman #2 Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cell Phone # : \_\_\_\_\_

Email: \_\_\_\_\_

T-shirt Size: \_\_\_\_\_

Groundman Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cell Phone # : \_\_\_\_\_

Email: \_\_\_\_\_

T-shirt Size: \_\_\_\_\_

# Journeyman Team Entry Form

<b>Entry Fee: \$250.00 per team*</b>	<b>Entry Deadline: May 18, 2018</b>
Check one: <input type="checkbox"/> Contractor <input type="checkbox"/> Electric Cooperative <input type="checkbox"/> Investor-Owned <input type="checkbox"/> Municipal <input type="checkbox"/> Seniors (45 & over)	Return to: Texas Lineman's Rodeo Association, Inc. c/o Susan Wilson 6400 IH 10 West Seguin, Texas 78155 <a href="mailto:swilson@gvec.org">swilson@gvec.org</a> 1 (800) 223-4832 x 4423
<b>*Late entries will be assessed a \$100 late fee. Please make checks payable to TLRA.</b> <b>**Any team changes after May 18, 2018 will result in \$100.00 change fee.</b>	

I hereby swear that I meet the requirements of a Journeyman Lineman as described by the TLRA and I am a qualified climber. I will abide by the rules as set out by the TLRA.

Journeyman #1, Team Captain; Signature: \_\_\_\_\_

Journeyman #2 Signature: \_\_\_\_\_

I hereby swear that I meet the requirements of a:

- Groundman as described by the TLRA.
- Journeyman Lineman and a qualified climber as described by the TLRA.

I will abide by the rules as set out by the TLRA.

Groundman Signature: \_\_\_\_\_

**NOTE: Only a qualified Journeyman can replace an injured Journeyman as a climber.**

As the registering Journeyman Team Supervisor and employer representative, I certify that the team is approved to compete and are qualified climbers, as per OSHA standards. The team meets the requirements to compete as described by the TLRA.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Utility Name: \_\_\_\_\_