



NATIONAL HIGH SCHOOL RODEO ASSOCIATION

MEMBERSHIP APPLICATION 2011-2012

(Please Print or Type)

STATE/PROVINCE SECRETARY USE ONLY Membership # Issued <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>

Name: _____

Mailing Address: _____ Telephone: (____) _____

City, State/Province: _____ Zip+4 / Postal Code: _____

Country: _____ Gender (circle one): Male Female Cell Phone: (____) _____

Email Address: _____ **Accept Text Messaging? Yes No**

State/Province Attending School In: _____ School Type (circle one): Public Private Home

Date of Birth: Month _____ Day _____ Year _____ Current Grade in School (circle one): 9 10 11 12

Age as of August 1, 2011 _____ Were you previously a member of the NHSRA Junior High Division? _____

State/Province Association in which you are applying for membership: _____

If you live in a different state than the one you are applying for membership in, have you submitted a signed transfer form? _____

Which Region/District (if applicable): _____ Years in NHSRA (circle one): 1 2 3 4 *(include current year)*

Check one: _____ Rookie (1st year) Member _____ Renewing Member

Type of Membership (check one): _____ Competing _____ Associate

(Competing members are eligible to enter events at qualifying rodeos, compete for awards and scholarships and qualify for the National High School Finals Rodeo. Associate members are not eligible to enter rodeo events. Both categories of membership are eligible for additional benefits from the region/district, state/province and the NHSRA as may be currently offered.)

Dues and Fees:

NHSRA Dues, Times Subscription,
 Western Horseman, and Insurance . . \$124.00 (U.S.) or \$65.00 (Foreign)
 State/Province Dues \$ **22.00**
 Region/District Dues \$ _____
OR
 "Associate Member" (Non-competing) \$40.00 (U.S.) or \$50.00 (Foreign)
Total \$ 146.00

IMPORTANT - PLEASE INITIAL

I understand that I receive a one-year subscription to *Western Horseman* magazine as a benefit of my NHSRA membership (**non-waivable**). Two-dollars of my NHSRA membership dues will be applied to this one-year subscription. *(Initial here)* _____

EVENTS (Competing Members Only)

(As a competing members you are eligible to enter any of the events offered for your gender. For statistical purposes, please check any and all of the events you are planning to enter at any time this rodeo season.)

BOYS EVENTS

- _____ Tie-Down Roping
- _____ Steer Wrestling
- _____ Bareback Riding
- _____ Saddle Bronc Riding
- _____ Bull Riding
- _____ Team Roping
- _____ Cutting

GIRL'S EVENTS

- _____ Barrel Racing
- _____ Pole Bending
- _____ Queen Contest
- _____ Goat Tying
- _____ Breakaway Roping
- _____ Team Roping
- _____ Cutting

Would you like to participate in sponsor surveys and focus groups, or receive email updates on NHSRA Programs and Sponsor Promotions? _____

If you are a new member, how did you learn about the NHSRA?

- | | |
|------------------------------|----------------------------|
| ___ Website | ___ FFA / School Poster |
| ___ Friend or Relative | ___ Print Advertisement |
| ___ Trade Show Booth | (Which publication?) _____ |
| ___ Membership Poster | _____ |
| ___ Television Ad | ___ Other (Please list) |
| ___ Packet from Natl. Office | _____ |

READ AND SIGN BELOW:

We certify that the information supplied in this application is true and correct to the best of our knowledge and belief and that the student applying for membership meets the qualifications and criteria for membership in the District/Region High School Rodeo Association, the State/Province High School Rodeo Association and the National High School Rodeo Association. By applying for and receiving membership in the District/Region, State/Province and National High School Rodeo Association, we hereby agree to follow all rules and guidelines set forth by the Region/District, State/Province and the National High School Rodeo Association and to abide by all decisions and rulings of the governing committees and boards of these associations.

Member Signature: X _____ Date: _____

Mother's Signature: X _____ Father's Signature: X _____

**(BOTH PARENTS AND/OR GUARDIANS MUST SIGN APPLICATION!)
 COMPLETE THE RELEASE FORM ON THE REVERSE SIDE OF THIS APPLICATION.**