



# NATIONAL HIGH SCHOOL RODEO ASSOCIATION MEMBERSHIP APPLICATION 2010-2011

(Please Print or Type)

STATE/PROVINCE SECRETARY USE ONLY Membership # Issued

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

Mailing Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

City, State/Province: \_\_\_\_\_ Zip+4 / Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Gender (circle one): Male Female

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

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, 2010 \_\_\_\_\_. Were you previously a member of the NHSRA Wrangler 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:	Competing	Associate
NHSRA Dues . . . . .	\$33.00	\$15.00
NHSRA Times Subscription (U.S.)	\$15.00	\$15.00
NHSRA Times Subscription (Foreign)	\$25.00	\$25.00
Western Horseman Subscription . .	\$2.00	N/A
Insurance . . . . .	\$74.00	\$10.00
State/Province Dues . . . . .	\$ _____	\$ _____
Region/District Dues . . . . .	\$ _____	\$ _____
<b>Total . . . . .</b>	<b>\$ _____</b>	<b>\$ _____</b>

**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

#### GIRLS' 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: \_\_\_\_\_

Parents/Guardians Signatures: X \_\_\_\_\_ X \_\_\_\_\_

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