



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 Cell Phone: (____) _____

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 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:	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	\$ _____	\$ _____
Total	\$ _____	\$ _____

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) _____

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	_____

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.)

- | | |
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| <p>BOYS EVENTS</p> <p>___ Tie-Down Roping</p> <p>___ Steer Wrestling</p> <p>___ Bareback Riding</p> <p>___ Saddle Bronc Riding</p> <p>___ Bull Riding</p> <p>___ Team Roping</p> <p>___ Cutting</p> | <p>GIRL'S EVENTS</p> <p>___ Barrel Racing</p> <p>___ Pole Bending</p> <p>___ Queen Contest</p> <p>___ Goat Tying</p> <p>___ Breakaway Roping</p> <p>___ Team Roping</p> <p>___ Cutting</p> |
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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.

**Michigan High School Rodeo Association
Wrangler/Senior Division
Permission Form**

Contestant: _____ Parents: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____

Phone #: _____ Cell: _____

Age: _____ Grade: _____

Parents Address: (if different) _____

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High School Division:

Bareback Riding: _____ Saddle Bronc Riding: _____

Bull Riding: _____ Steer Wrestling: _____

Calf Roping: _____ Team Roping: _____

Boys Cutting: _____ Girls Cutting: _____

Goat Tying: _____ Break-A-Way Roping: _____

Pole Bending: _____ Barrel Racing: _____

Queen Contest: _____

Wrangler Division:

Barrel Racing: _____ Pole Bending: _____

Goat Tying: (girls) _____ Breakaway Roping: (girls) _____

Team Roping: _____ Ribbon Roping: _____

Calf Roping: _____ Chute Dogging: _____

Goat Tying: (boys) _____ Breakaway Roping: (boys) _____

Bull Riding: _____ Team Roping: _____

(Wrangler Boys must choose Calf Roping or Breakaway)

We, the parents, give our permission for said contestant to participate in said rodeo and agree to hold the MHSRA unaccountable for any liability whatsoever resulting from his/her participation in said rodeo.

We, the parents or guardians of _____, give the local hospital and the physician in the medical staff of the hospital permission to administer necessary emergency treatment for injuries he/she may incur while participating in a high school rodeo. We understand that each contestant must be and is covered by medical insurance. We hereby release the local hospital and physicians on the medical staff and the rodeo sponsors from all liability.

Contestant's Signature: _____ Date: _____

Mother's Signature: _____ Date: _____

Father's Signature: _____ Date: _____