



NHSRA Jr. High Division Membership Application 2018-2019

[Please Print Clearly or Type & Fill In All Blanks]

STATE/ PROVINCE
SECRETARY USE ONLY
NHSRA MEMBER #

Name: _____ Primary Phone: (____) _____

Mailing Address: _____ Other Phone #: (____) _____

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

Country: _____ Email Address: _____

Date of Birth: Month _____ Day _____ Year _____ Gender: ___ Male ___ Female

Check One:

___ Rookie (1st year) Member

___ Renewing Member

Number of Years in NHSRA JH Division: 0 1 2 3

State/Province Association: _____ Region/District [if applicable]: _____

If you live in a different state than applying for, have you submitted a signed transfer form? ___ Yes ___ No

EVENTS

As a competing member, 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 any time this rodeo season.

BOYS EVENTS:

- BAREBACK STEER RIDING
- BREAKAWAY ROPING
- BULL RIDING
- CHUTE DOGGING
- GOAT TYING
- RIBBON ROPING
- SADDLE BRONC STEER RIDING
- TIE- DOWN ROPING
- TEAM ROPING
- LIGH RIFLE SHOOTING

GIRLS EVENTS:

- BARREL RACING
- BREAKAWAY ROPING
- GOAT TYING
- RIBBON ROPING
- POLE BENDING
- TEAM ROPING
- LIGHT RIFLE SHOOTING

SCHOOL INFORMATION

School Name: _____

City of Attending School: _____

State/ Province of Attending School: _____

School Type: ___ Public ___ Private ___ Homeschool

Current Grade: ___ 6th ___ 7th ___ 8th

Dues and Fees -Competing Member:

U.S Members: NHSRA Dues, Insurance, NHSRA Times & Western Horseman \$80

Foreign Members: NSHRA Dues, NHSRA Times & Western Horseman \$59

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. \$2 of my membership dues will be applied to this one-year subscription.

Initial Here: _____

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 that National High School Rodeo Association. By applying for and receiving membership in the District/Region, State/Province and the 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 decision and rulings of the governing committees and boards of these associations.

Member's Signature: _____

Date: _____

Mother's Signature: _____

Date: _____

Father's Signature: _____

Date: _____

**BOTH PARENTS AND/OR GUARDIANS MUST SIGN APPLICATION.
BE SURE TO COMPLETE THE MINORS RELEASE FORM.**