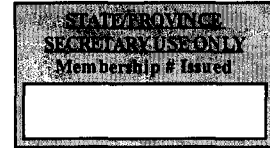




NHSRA WRANGLER DIVISION

MEMBERSHIP APPLICATION 2009-2010



(Please Print or Type)

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): 6 7 8

Age as of August 1, 2009 _____.

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 WD (circle one): 1 2 3 (include current year)

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

Dues and Fees:	Competing
NHSRA WD Dues	\$28.00
NHSRA Times Subscription (U.S.)	\$15.00
NHSRA Times Subscription (Foreign)	\$25.00
Western Horseman Subscription	\$2.00
Insurance	\$35.00
State/Province Dues	\$ <u>20</u>
Region/District Dues	\$ _____
Total	\$ <u>100</u>

IMPORTANT - PLEASE INITIAL

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

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

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 at any time this rodeo season.)

- | BOYS' EVENTS | GIRLS' EVENTS |
|---|---|
| <input type="checkbox"/> Tie-Down Roping | <input type="checkbox"/> Barrel Racing |
| <input type="checkbox"/> Chute Dogging | <input type="checkbox"/> Pole Bending |
| <input type="checkbox"/> Goat Tying | <input type="checkbox"/> Goat Tying |
| <input type="checkbox"/> Breakaway Roping | <input type="checkbox"/> Breakaway Roping |
| <input type="checkbox"/> Bull Riding | <input type="checkbox"/> Team Roping |
| <input type="checkbox"/> Team Roping | <input type="checkbox"/> Ribbon Roping |
| <input type="checkbox"/> Ribbon Roping | |

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

<input type="checkbox"/> Website	<input type="checkbox"/> FFA / School Poster
<input type="checkbox"/> Friend or Relative	<input type="checkbox"/> Print Advertisement
<input type="checkbox"/> Trade Show Booth	(Which publication?) _____
<input type="checkbox"/> Membership Poster	_____
<input type="checkbox"/> Television Ad	<input type="checkbox"/> Other (Please list)
<input type="checkbox"/> Packet from Ntl. 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 Wrangler Division, the State/Province High School Rodeo Association Wrangler Division and the National High School Rodeo Association Wrangler Division. 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 Wrangler Division 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.