



**PROFESSIONAL'S CHOICE – NHSRA-WD**  
**AIR RIDE™ STUDENT ATHLETE OF THE MONTH APPLICATION**

When completing this application, please type or print using black or blue ink. Entries must be received by **May 1, 2010** to be eligible. Incomplete or illegible entries will not be considered. You must be an active member of NHSRA WD in good standing to be eligible for this award. Mail your application, essay, reference letter and picture (in WESTERN ATTIRE) to: Professional's Choice Student Athlete of the Month, c/o NHSRA WD, 12001 Tejon Street, Suite 128, Denver, CO 80234.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ EMAIL \_\_\_\_\_

AGE \_\_\_\_\_ GRADE \_\_\_\_\_ GPA \_\_\_\_\_ SCHOOL \_\_\_\_\_

FAVORITE SUBJECT \_\_\_\_\_

EXTRA-CURRICULAR ACTIVITIES \_\_\_\_\_

NUMBER OF YEARS IN NHSRA WD \_\_\_\_\_

FAVORITE NHSRA WD EVENT \_\_\_\_\_

HOBBIES \_\_\_\_\_

ACCOMPLISHMENTS \_\_\_\_\_

VOLUNTEER EXPERIENCE \_\_\_\_\_

GOALS (athletic, academic, post-graduation) \_\_\_\_\_

MOST ADMIRER PERSON AND WHY \_\_\_\_\_

LIST ONE ADJECTIVE SOMEONE WOULD USE TO DESCRIBE YOU \_\_\_\_\_

**ESSAY:** Please attach another sheet to this application. Your essay should be 150 words or less.

**“You have just been asked to raise money and/or awareness for a community cause or event.**

**How would you accomplish this goal?” (Please be specific)**

Dear NHSRA-Wrangler Division Member,

Professional's Choice hit the road running with their new NHSRA sponsorship program in the spring of 2001 and the pace hasn't slowed. In addition to supporting the annual NHSFR scholarship fund and providing over \$20,000 in prizes for 2009 NHSFR contestants, Professional's Choice has stepped up the pace by once again featuring an exciting program called the Professional's Choice-NHSRA Air Ride™ Student Athlete of the Month awards designed to recognize exemplary NHSRA-Wrangler Division members who are well-rounded students and are active in their communities.

Featuring the Professional's Choice scientifically tested SMx Air Ride™ saddle pad system, boy's and girl's Air Ride™ Student Athlete of the Month winners will be selected based on involvement in extra-curricular activities, volunteerism, goals, as well as other related accomplishments. In addition, each applicant will be required to write a short 150 word or fewer essays on the question **"You have just been asked to raise money and/or awareness for a community cause or event. How would you accomplish this goal?"** To be considered, the applicant must be a current NHSRA-Wrangler Division member in good standing and the application must include:

1. All requested materials and the application must be legible.
2. A computer generated essay (150 words or less) related to the above question.
3. Reference letter from an NHSRA or NHSRA-Wrangler Division member, teacher, or other qualified person.
4. Picture and photo release (if applicable). **IMPORTANT:** The picture cannot be returned. Student **MUST** be in Western attire.
5. Only information submitted on the official application form will be considered.
6. Only applications received between September 1, 2009 and May 1, 2010 will be considered.

Monthly boy's and girl's winners will receive a new Air Ride™ saddle pad and will be featured in the NHSRA Times and on the NHSRA-Wrangler Division's official website at <http://nhsrawranglerdivision.org/>. From the monthly winners both a boy's and girl's national winner will be selected and awarded \$1,000 scholarships each at the Wrangler Junior High Finals Rodeo. Once you have submitted an application it is not necessary to re-submit a new application. All applications received to date will be considered monthly. However, you can resubmit a new application if situations have occurred that will strengthen your original application.

Remember, the quicker your application is received, the greater the number of monthly chances you will have to be chosen. If you have any questions concerning the new Professional's Choice-NHSRA-WD Air Ride™ Student Athlete of the Month program, call the NHSRA-Wrangler Division office at 800-466-4772 or visit the NHSRA-Wrangler Division website. Best of luck with the 2009-2010 rodeo season and we look forward to seeing your application soon.

Sincerely,  
Lisa Lowry, Sponsorship Director

**LIMITED LICENSE FOR USE OF CERTAIN PHOTOS**

This agreement is made between \_\_\_\_\_ (Hereinafter referred to as "Photographer") and Professional's Choice Sports Medicine Products, Inc. This Agreement is made with reference to the following facts:

- A. That Photographer, an independent contractor, has prepared some photographs.
- B. That the Photographs may be described and identified as follows:  
Subject(s) of Photographs:  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) on which Photographer shot Photographs:  
\_\_\_\_\_

- C. That Professional's Choice Sports Medicine Products, Inc. being engaged in the business of producing advertising materials and publications for use by itself and clients, wishes to employ the Photographs in the creation of certain of those advertising materials or publications.

1. That Professional's Choice will pay to the Photographer the sum of \_\_\_\_\_ Dollars (\$), which amount it is agreed will constitute Photographer's entire fee and only payment for the grant of rights made by Photographer herein.
2. That the Photographer hereby assigns to Professional's Choice the unrestricted and unlimited right to use each and every Photograph described above for use in print promotions created between \_\_\_\_\_ and \_\_\_\_\_.

3. That Professional's Choice shall have the right to crop, edit, alter or otherwise modify the Photographs to the extent that it, sole discretion, deems necessary to conform them to the style, design or physical dimensions for the advertising materials or publications in which they are incorporated or suit them to such other use(s) as Professional's Choice may choose to make them

4. That Photographer warrants that he or she is the owner of copyright of the Photographs and possess full right and authority to the rights herein granted. Photographer further warrants that the Photographs do not infringe the copyrights in any other works soever, and do not invade any privacy, publicity, trademark, or other rights of any other person; however, such warranty by Photographer shall not related to or include any specific direct contribution(s) to the creation of the Photograph made by any employee or agent of Professional's Choice. Photographer agrees to indemnify and hold Professional's Choice harmless in any litigation or other direction in which a third party challenges any of the warranties made by Photographer in the Paragraph; and

5. That this Agreement shall be governed by the laws of the State of California applicable to contracts made and to be perfected therein and, shall be construed according to the Copyright Law of the United States of America; and

6. That this Agreement shall ensure to the benefit of and bind the parties and their respective heirs, representatives, successor assigns.

In witness whereof Professional's Choice and Photographer have executed this Agreement as of the \_\_\_\_ Day of \_\_\_\_\_, 2009-2010.

_____ (Signature of Photographer)	Professional's Choice Sports Medicine Products
_____ Address	2025 Gillespie Way, Suite 106
_____	El Cajon, CA 92020

_____ Date of Birth	By: _____
_____ Social Security Number	_____