

IMPORTANT PLEASE READ

- Fill out the forms by typing the information in the provided fields in the downloadable application. Then print the form.
- Hand written forms **WILL NOT** be accepted this year by Nationals or Colorado!
- MEMBERSHIP APPLICATION **WILL BE SENT BACK** IF YOU DO NOT FOLLOW THE DIRECTIONS.
- *Signatures and Notary must be original hand signed signature.*

Thanks for your cooperation!



To all prospective CSHSRA Members;

Please read & follow all instructions!

Complete the enclosed application in its entirety. This is VERY IMPORTANT!!! The NHSRA office will return all incomplete applications and they will be sent back to you, delaying your membership.

ALL MEMBERS WILL BE REQUIRED TO PARTICIPATE IN FUND RAISERS TO BE ELIGIBLE TO RODEO – THERE WILL BE NO EXCEPTIONS!

Read the Colorado State Guide Lines (On website) before becoming a member! It is important information.

Be sure that BOTH your parents or a LEGAL Guardian sign both sides or pages of the application. *If only one parent is signing, please note reason on signature line. (For example, Deceased, Divorced and Full Custody, etc.) The application MUST be NOTARIZED. Your Social Society Number must be put on the 2nd page. Make sure you select your current year in the organization.

The dues are \$300.00 for HS and \$225.00 for JH, \$100.00 of this is set-aside for the CSHSRA State Finals (This is the Sponsorship Fee). If you have a sponsor for any part of your dues please complete the Sponsorship Form so that your sponsor can be recognized in the State Finals Program.

This paper work MUST be completed and returned to the office before you can enter your 1st rodeo. DO NOT wait and have to pay overnight fees (they are expensive). I WILL NOT take entries without Memberships.

Check List of Needed Forms-ALL FORMS MUST BE TYPED/FILLED OUT & THEN PRINTED:

1. Membership Application *
(Both Parents Must Sign & Must be Notarized-After you print)
2. Sponsorship Form (If you have a sponsor)
3. Membership Application Money (Application Money can be check or MO - \$300.00 Total)
4. Certification of Eligibility Form (Most School Secretaries start the middle of August)
5. Current/Last Report Card
6. Hospital Release Form (Must be Notarized)
7. Code of Conduct (Both Parents Sign)

I must have all forms and money before you can become a member. **PLEASE DON'T WAIT!**

Return To: CSHSRA

PO Box 11

(If sending UPS or FED-EX) 25511 Colorado River Rd.

Burns, CO 80426

If you have any questions please call 970-653-0122. Sherri Schlegel, CSHSRA Secretary and Central Entry



National High School Rodeo Association

Membership Application 2015-2016

(Please Print Clearly or Type and Fill In All Blanks)

STATE/PROVINCE
SECRETARY USE ONLY
NHSRA Membership #

Name: _____

Mailing Address: _____ Phone: (____) _____

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

Country: _____ Gender: Male Female Cell Phone: (____) _____

Email Address: _____

State/Province Attending School In: _____ School Type: Public Private Home

Date of Birth: Month: _____ Day: _____ Year: _____ Current Grade in School: 9 10 11 12

Number of AQHA Registered Horses: _____ Number of Years in JH Division: 0 1 2 3

State/Province Association in which you are applying for membership: _____

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

Which Region/District (if applicable): _____ Number of Years in NHSRA (include current year): 1 2 3 4

Check One: Rookie (1st year) Member Renewing Member

Dues and Fees Competing Member

NHSRA Dues, *NHSRA Times*, *Western Horseman*
and Insurance \$124.00 (U.S.) or \$65.00 (Foreign)

State/Province Dues \$ _____

Region/District Dues \$ _____

OR Associate Member (non competing) \$40.00 (U.S.) or \$65.00 (Foreign)

Total \$ _____

Type of Membership: Competing Associate

Competing members are eligible to enter events at qualifying rodeos, compete for awards and scholarships and qualify for the NHSFR. Associate members are not eligible to enter rodeos. Both categories are eligible for additional benefits as may be currently offered.

Important – Please Initial

I understand that I receive a one-year subscription to *Western Horseman* magazine as a benefit of my NHSRA membership. Two dollars of my membership dues will be applied to this one-year subscription. **Initial Here:** _____

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

- Tie-Down Roping
- Steer Wrestling
- Bareback Riding
- Saddle Bronc Riding
- Bull Riding
- Team Roping
- Cutting
- Reined Cow Horse

Girls Events

- Barrel Racing
- Pole Bending
- Queen Contest
- Goat Tying
- Breakaway Roping
- Team Roping
- Cutting
- Reined Cow Horse

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

- | | |
|--------------------------|--|
| Website | Print Advertisement
(Which Publication) |
| Friend or Relative | _____ |
| Trade Show Booth | _____ |
| Membership Poster | Other (Please List) |
| Television Advertising | _____ |
| FFA/School Poster | |
| Facebook or Social Media | |

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
COMPLETE THE RELEASE FORM ON THE REVERSE SIDE OF THIS APPLICATION**

NATIONAL HIGH SCHOOL RODEO ASSOCIATION

(Please Print Clearly or Type and fill in all blanks)

Member's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone #: _____ DOB: Month _____ Day _____ Year _____

MINOR'S RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

We, the undersigned, hereby request that the below named minor (minor) be granted permission (1) to enter the restricted area, (2) to participate as a contestant, assistant, official or otherwise in rodeo events, (3) to compete for money, prizes, recognition or reward, (4) to be covered by participants' hospitalization insurance, if applicable, as limited by the master policy (all collectively hereinafter called "permissive entry").

In consideration of "permissive entry" to minor into the restricted area, which is the area from which admission to the general public is restricted, which includes, but is not limited to the rodeo arena, competition area, chutes, pens, adjacent walkways, concessions, and other appurtenances, we, the undersigned, on behalf of the minor and for ourselves, our personal representatives, heirs, next of kin, spouses and assigns, do hereby:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the rodeo committee, stock contractor, rodeo association, sponsors, arena operators or owners, and each of them, their officers, agents and employees (all hereinafter collectively referred to as "releasees") from any and all claims and liability arising out of strict liability or ordinary negligence of releasees or any other participant which causes the undersigned injury, death, damages or property damage. We, the undersigned, jointly, severally, and in common, covenant to hold releasees harmless and to indemnify releasees from any claim, judgement or expenses releasees may incur arising out of any of the minor's activities or presence in the restricted area.

2. UNDERSTAND that minor's entry into the restricted area and/or participation in rodeo events contains DANGER AND RISK OF INJURY OR DEATH TO MINOR, that conditions of the rodeo arena change from time to time and may become more hazardous, that rodeo animals are dangerous and unpredictable, and that there is INHERENT DANGER in rodeo which we each appreciate and voluntarily assume because the minor and we choose to do so. Each of the undersigned has observed events of the type that the minor seeks to participate in. We further understand that the arena surface, access ways or lack thereof, lighting or lack thereof, and weather conditions all change and pose a danger to the minor. We further understand that other contestants and participants pose a danger to the minor, but nevertheless, WE EACH VOLUNTARILY ELECT TO ACCEPT ALL RISKS connected with the minor's entry into the restricted area and/or participation in any rodeo events.

3. AGREE that this agreement shall apply to any incident, injury, accident or death occurring on the above date and FOR A PERIOD OF TIME covering any statutory period in which a cause of action may accrue for minors or adults. All subsequent agreements and release documents signed by any of the undersigned shall amplify, but shall in no way limit the provisions of this document. The provisions of this document may be cancelled by any one of the undersigned by delivering to the above rodeo association written cancellation of this agreement which shall be effective 24 hours after the date said cancellation is actually received by the rodeo association.

4. Releasor or parents or guardians of the undersigned minor AGREE TO INDEMNIFY the Releasees and each of them from any loss, liability, damage or costs they may incur due to the presence or participation of the minor in the described activities whether caused by the negligence of the Releasees or otherwise.

WE HAVE READ THIS DOCUMENT, WE UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. WE APPRECIATE AND ASSUME ALL RISKS INHERENT IN RODEO.

Signature of Natural Father Print Clearly or Type Name of Natural Father

Signature of Natural Mother Print Clearly or Type Name of Natural Mother

Signature of Legal Guardian Print Clearly or Type Name of Legal Guardian

Signature of Member Print Clearly or Type Name of Member

On this _____ day of _____, 20____, before me, personally appeared _____
Notary: List all Names Notorized

to me known to be the persons who executed the foregoing Release and acknowledged that they signed same as their free act and deed.

My Commission Expires: _____
Notary Public

*Both parents and member or legal guardian must sign this form in the appropriate places above. If only one parent is signing, please note reason on signature line. For example, DECEASED, DIVORCED AND FULL CUSTODY, ETC. All signatures must be witnessed by a notary and listed as personally appearing in the appropriate place on the form. Be sure that notary signs, dates and places his/her seal on the form. Please return original Minor's Release form to the state/province secretary with membership application and fees.



Certification of Eligibility Form

This form must be turned in with the member's CURRENT REPORT CARD and Membership Application

NAME: _____

CLUB NAME: _____

LAST YEAR MEMBERSHIP #: _____ ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

HOME PHONE: _____ Parent Cell Phone _____

Members Cell Phone: _____ SS #: _____

GRADE: _____ AGE: _____ BIRTHDATE: _____

PARENTS OR GUARDIANS (Please PRINT names): _____

Parents and Members Please Fill Out and Sign

I, hereby certify, that I am in the _____ grade and enrolled in _____

High School or Jr. High School, and I will graduate in 20 _____(year).

(Signature of Member)

(Date)

(Signature of Parent or Guardian)

(Date)

SCHOOL CERTIFICATION OF ELIGIBILITY *(Have School Fill Out or Parent if Home Schooled)*

I, the undersigned, do hereby certify that _____, is enrolled in

_____ High School or Jr. High School, and has passing grade in four

subjects, or if enrolled in less than four subjects, has passing grades in ALL subjects.

School Official Signature Title Date Phone

CSHSRA
Hospital Release Form

Must have form filled out, signed, and notarized, to rodeo!

Any questions about this form please contact the state secretary Sherri Schlegel at: 970-653-0122

All CSHSRA Rodeo and CJHRA Rodeo.

CONTESTANT'S NAME: _____

CLUB NAME: _____

NATIONAL CARD#: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ GRADE: _____ AGE: _____ BIRTHDATE: _____

PARENTS OR LEGAL GUARDIANS MUST READ, FILL OUT, SIGN, AND NOTARIZE

HOSPITAL RELEASE

We, the parent/guardians of _____ give the Local Hospital and the physicians on the medical Staff of the hospital permission to administer necessary emergency treatment for injuries he/she incur while participating in the above named CSHSRA rodeo. ***WE UNDERSTAND EACH CONTESTANT MUST BE AND IS COVERED BY MEDICAL INSURANCE.*** We hereby release the hospital, physician, medical staff, and the rodeo sponsors from all liability.

Signed: _____ Notary: _____
(Parent/Guardian)

Commission expires: _____

Date: _____

Responsibility Agreement

As a member of CSHSRA & CJHRA, it is your responsibility to meet the following responsibilities and obligations. If any Colorado member or parent has any questions about these responsibilities, please feel free to contact your State President, National Director, State Secretary or a CSHSRA Board member. The contact information for these people can be found on our website.

Please read the following agreement and send a signed copy to the State Secretary or give to your Club leader. **Make and retain a copy for your records.**

Members, you must choose one of the following options as your Fundraiser agreement. Please understand each option and what it entails.

Once this agreement has been signed, you have committed to fulfilling this financial agreement.

Both the contestant AND the parent(s) need to sign this form. All monies are due in **April** (Date will be posted on website). If you do not have this money turned in by the designated date you will not be allowed to compete in the Colorado State Finals.

Option # 1 - Sell 40 Raffle Tickets @ \$5.00 each

Option # 2 – Turn in \$200.00 in cash donations and return tickets. (Send to: CSHSRA, PO Box 11, Burns, CO 80426)

Please list your choice here _____

As parents of the Colorado State member, you agree to be financially responsible for this mandatory requirement.

Colorado member signature

Please print your name

Colorado parent signature

Please print your name

* Raffle Ticket monies pay for Year End Awards, State Finals, and National Teams.



CODE OF CONDUCT

The CSHSRA will follow the following guidelines for disciplinary action:
Rule Book - Page 31 (As amended by the CSHSRA Board of Directors)

a) Conduct

- 1) Animal Abuse of any kind - In or Out of the Arena
- 2) Having any association with alcoholic beverages, narcotic or other non medicinal drugs during the fall and spring rodeo season.
- 3) Rowdiness, quarreling or fighting in the actual domain of the arena at any time, or any place during the duration of the Rodeo.
- 4) Conduct or speech of any kind detrimental to the best interests of the National High School Rodeo Association or the sport of rodeo while in attendance, or coming to and going home from a rodeo.
- 5) Motel or property damage by contestants or their associates; damage must be reported to their State's national Director and if damage is not reported, contestant will be banned from High School Rodeo Association Permanently and reported to law authorities for prosecution.
- 6) Contestants will be disqualified for vandalism at any place or any time.
- 7) Cheating or attempting to cheat.
- 8a) Any contestants attempting to fix, threaten, bribe, influence, harass or coerce any rodeo official at any time between opening and closing of a rodeo.
- b) Any parent attempting to fix, threaten, bribe, influence, harass or coerce any rodeo official or child at any time between opening and closing of a rodeo.
- 9) Missing any mandatory meeting, safety seminar or equipment check.

For any infraction of the above stated Code of Conduct, the CSHSRA & CJHRA Board of Directors and or National Director may enforce a level of penalty ranging from:

A Public Apology over the Loud Speaker to a Suspension from the Association
I have read, understood, and agree to abide by these Rules & Regulations as they apply to my participation in the Colorado High School Rodeo Association.

Student Name -Print _____

Student Signature _____ Date _____

Parent Signature _____ Date _____

Parent Signature _____ Date _____



CSHSRA/CJHRA

Sponsorship Program

Your total membership fee is \$300.00 for High School or \$225.00 for Jr. High. If you would like to list a sponsor for any of this fee, please fill out this form. The sponsor will be listed on the website and in the State Finals Program.

We thank-you for your support and help in funding our association!

Please make checks payable to: CSHSRA or CJHRA
Contact person is Sherri Schlegel, State Rodeo Secretary, 970-653-0122

Date Paid: _____

Amount Paid: _____

Member's Name: _____

Sponsors' Name: _____