



DISTRICT # _____

California Wrangler Junior High Division

2009-2010 MEMBERSHIP APPLICATION

website: www.chsra.com

Please Print Legibly Do Not Use Pencil.

NAME: _____ SOC SEC #: _____

(Must be included)

MAILING ADDRESS: _____ COUNTY: _____

PHYSICAL ADDRESS: (if different from above) _____

CITY/STATE/ZIP: _____ M() F()

HOME TELEPHONE: () _____ PARENT CELL PHONE #: () _____

DATE OF BIRTH: _____ AGE: _____

Were you a NHSRA member last year? YES NO

I hereby certify that I am enrolled in _____ Junior High School, Currently in Grade: 6 7 8 (circle one)

If any information is found to be false on this application or entry forms, your membership is automatically terminated and your dues, points, and point standing forfeited.

Date _____ Signature of Member: _____

Date _____ Signature of Parent/Guardian: _____

2009-2010 FEES: \$ 120.00 (National Dues & Fees, State Dues and Fees)

CERTIFICATION OF ELIGIBILITY (to be filled in by school)

I do certify that this student meets grade and conduct qualifications of the California Junior High Rodeo Division High Standards. (has both a 2.0 as of latest grading period and at least 4 passing subject grades or if less than 4 subjects, must be passing in all with a 2.0 GPA)

_____ is enrolled in _____
(Student Name) (School Name)

County of _____ and as of the last grading period the following applies:

Please mark one of the following that applies to above student:

- [] 2.0 GPA or better as of last grading period and 4 passing grades
[] Has 4 passing grades, (May join now but must earn 2.0 or better on next grading period to participate in Rodeo's)

(Signature of Principal or Counselor)

(Positions or Title and Tel #)

(School Seal) Or Stamp

- MAKE 1 COPY OF THIS CALIFORNIA WRANGLER JR HIGH DIV. MEMBERSHIP FORM
MAKE 2 COPIES OF NHSRA MEMBERSHIP FORM and Minor's Release
2 COPIES OF YOUR MOST RECENT REPORT CARD MUST ACCOMPANY THIS APPLICATION.
NEW MEMBERS INCLUDE 2 COPIES OF BIRTH CERTIFICATE.

ALL PAPERWORK MUST BE COMPLETED BEFORE YOU ARE ELIGIBLE TO RODEO IN THE 2009-2010 SEASON. Please send all above related forms and copies to your District Secretary:

Membership Secretary Name: _____
ADDRESS: _____
CITY, STATE, ZIP _____ PHONE NUMBER _____