

California High School Rodeo Association

2018-2019 MEMBERSHIP APPLICATION

website: www.chsra.com

PLEASE FILL OUT COMPLETELY AND NEATLY

Name:	M () F ()
Mailing Address:	
City, State, Zip	County
Physical Address: (if different from above)	
City, State, Zip	Email:
Physical Address: (if different from above) City, State, Zip Email: Home Phone: Parent Cell Phone:	
Date of Birth:Age:	Parent Email:
Are you a returning NHSRA High School member? YE	
I hereby certify that I am enrolled in	_High School, currently enrolled in grade 9 10 11 12 (circle one)
If any information is found to be false on this applica	tion or entry forms, your membership is automatically terminated
and your dues, points and point standings forfeited.	
Signature of Student	Date:
Signature of Parent/Guardian	Date:
2018-2019 Fees: \$165.00 (National AND State	dues and fees)
CERTIFICATION OF E	LIGIBILTY (to be filled out by school) ***********************************
	DUCT qualifications of the California High School Rodeo Association (minimum of 5 weeks) <i>and</i> must be passing in minimum of 4 sing ALL with a 2.0 GPA)
is en	rolled in
(Student name)	(High School Name)
County of and as of the <u>last grading period</u> the following applies:	
Please mark on of the following that applies to the al	oove student:
[] 2.0 GPA or better as of the last grading period and 4 passing grades	
(Signature of Principal, Counselor or Registrar)	(Position or title AND telephone number) (school seal)
	ry if you have any questions il: ppachie@att.net ne Number: 707-272-5919