



South Carolina High School Rodeo Association

State Membership Application

2019-2020



Complete the national membership form online (www.nhsra.com). Next, fill out this state form and return it with cash or check made payable to SCHSRA. All members must be passing 70% of the classes taken.

Name: _____ Telephone: (____) _____ Cell: (____) _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ SS#: _____

Date of Birth: _____ Age: _____ Email: _____

Years in SCHSRA (including present): _____ High School: _____ Grade: _____

Father's Name: _____ Cell:(____) _____

Mother's Name: _____ Cell:(____) _____

Membership Fees:	
SCHSRA Dues	\$ 61.00
NHSRA Dues	<u>\$124.00</u>
Total Dues	\$185.00

Return both state and national applications, minor release, a copy of your birth certificate, a copy of your report card to:

Julia Rankin, State Secretary
P.O Box 177
Saluda, SC 29138

I understand that as a member of the SCHSRA, I will adhere to and abide by all rules set forth in the NHSRA Rulebook and ground rules set by SCHSRA. No Exceptions.

I understand that I will be expected to participate in any fund raising projects including ad sales for our State Finals Program and Raffle Sales.

The SCHSRA/SCJHD/SCYRA recognizes the importance of the internet in shaping public thinking about our organization and our current rodeo program. As a member and a parent, I will not post derogatory or negative comments on social media about our association. (Facebook, Twitter, Instagram, SnapChat or any other sites)

Member's Signature: _____ Parent's Signature: _____

The above signature gives us permission to publish your address and telephone number in our directory.

There will be a \$35.00 charge for all returned checks.

Do not write in this space.....

Membership # _____ Paid: Check _____ Cash _____