

Northwest Ranch Cowboys Rodeo Association

IMPORTANT - Please check:		
<input type="checkbox"/> New Member	<input type="checkbox"/> Renewal	<input type="checkbox"/> I hold/have held a Pro Card

Mail Application to:
NRCA
11921 SD Hwy. 79 Prairie City, SD 57649

STATEMENT AND RELEASE

****THIS FORM MUST BE COMPLETED, SIGNED, NOTARIZED and on file with the NRCA before applicant may be issued a membership card!**

I _____ hereby make application for membership in the Northwest Ranch Cowboys Rodeo Association (NRCA). I certify that **I am** a U.S. citizen and a bonafide resident of one of the following states (Montana, Nebraska, North Dakota, South Dakota, Wyoming). If I **am not** a bonafide resident of the before mentioned states, I understand that it is my responsibility to inform and provide the NRCA with proof of residency should I become a resident. Points for awards will not accumulate until proof of residency has been established.

I _____ also agree, in consideration for my acceptance as a member, to release and forever discharge the NRCA, its officers, agents, employees, helpers, and sponsors from any claim for injury to my person or property, resulting from participation in any rodeo. I acknowledge that I am aware that rodeo is a dangerous sport and that serious injuries do occur. I further acknowledge that I have read these statements, understand their content and certify my compliance by my signature below.

Do you qualify for rookie? - "First year NRCA card holders who have not held a PRCA, WPRA or PBR card and are under the age of 21 years." **Yes** or **No** (Circle one).

Applicant Address ****IMPORTANT - Please fill in completely

Date _____
Name _____ Street Address or Box No. _____
City _____ State _____ Zip _____
Phone _____ SMB Date of Birth _____ Age if under 21 _____
Events Worked _____ **HEADER** or **HEELER** (Circle)
SOCIAL SECURITY NUMBER: _____ Email: _____

**Complete below if applicant is a minor--must be notarized

I declare that I am one of the parents and/or guardian of the above named minor; that I have carefully read the foregoing statement and release; that I know the representations made are true and that I agree to be bound by the terms of the statement and release both personally and as representative of the interest of the minor.

Signature _____ Date _____

Signature _____ Date _____

Subscribed and sworn before me this _____ day of _____, 20_____

Notary Public _____ Date Commission Expires _____

Memberships-\$100 after May 15, \$85 before May 15
Contractors are \$100 - Inactive Memberships are \$15
Personnel Memberships- \$75 after July 1, \$50 before July 1
Memberships include subscription to The Wrangler
First year members CASH (Cashiers Check or Money Order)
Make checks payable to NRCA