***Mississippi High School Rodeo Association***

***2025-2026 Membership Form***

*PLEASE TYPE OR PRINT* - **ALL SPACES MUST BE COMPLETED**

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AGE:\_\_\_\_\_\_\_SEX\_\_\_\_\_\_\_

MAILING ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY, STATE, ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CELL PHONE NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE IN SCHOOL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF SCHOOL or HOMESCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL'S MAILING ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL'S CITY, STATE, ZIP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL'S PHONE NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SCHOOL’S FAX NO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have medical insurance? \_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_\_No

* PARENTS’ NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Mom’s Cell & Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Dad’s Cell & Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been a member of the Mississippi High School Rodeo Association before now? \_\_\_Yes \_\_\_No

Would you like to serve as an **Event Director**? \_\_\_\_Yes \_\_\_\_\_No. Which event(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you be interested in the **Shooting Sport Events**? \_\_\_\_Yes \_\_\_\_\_No. \_\_\_\_\_\_Light Rifle \_\_\_\_\_ Trap \_\_\_\_\_ Both

Would you be interested in a clinic? \_\_ Cutting \_\_ Reined Cow Horse \_\_ Rough stock \_\_ Queen Contest \_\_\_\_\_\_\_\_

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who would you like to see a bid obtained from for State Finals Awards?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Saddle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Buckle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Top Ten Awards (be specific)

**TO DO:**

1. **MEMBERSHIP FEES: When you process the National membership on www.NHSRA.com, you will pay both National and State dues of $165 ($139 National and $26 State). This will be paid electronically on their web page.**
2. **FORMS: While on the National membership page you can print out their two forms and the two MS forms required to complete your membership process. Follow the instructions on these forms. The forms MUST be signed by BOTH PARENTS, MEMBER and be *NOTARIZED as indicated*. If Sole Custody, Death, or another circumstance prohibits a parent from signing this must be documented.**
   1. **These 4 forms must be uploaded back to your National Membership profile once completed.**
3. **School Transcript: If you completed at the June, 2025, HS and/or Jr. High State Finals, you do not need to send in a school transcript at this time. We will use the one on file. If you are a NEW Member, your SCHOOL WILL NEED TO SEND YOUR 2024-2025 school grade transcript DIRECTLY TO THE SECRETARY.** 
   1. **It MUST be mailed and/or emailed DIRECTLY FROM YOUR SCHOOL or this application WILL NOT be valid. A complete grade transcript with 2024-2025 school year grades, grading scale, principal's signature and school seal or stamp must be on it!**
   2. **Homeschoolers: Please provide proof of enrollment/certificate of homeschool enrollment from your county’s attendance officer.** 
      1. **Send to: MHSRA 4165 Road 386, Kiln, MS, 39556, or** [**mshsra1967@gmail.com**](mailto:mshsra1967@gmail.com)

**4. (OPTIONAL) ADULT MEMBERSHIP DUES: $20.00 PER PERSON.**

- Adult Membership runs from September 1, 2025 – August 31, 2026. The membership fee entitles each member to a vote at any annual or general membership meeting. The last date/deadline to join is at 3:00 pm on the Saturday of the State Finals.

- If you would like to join at this time, please print the form from the web page link and mail your check to the above address.