



SOUTHERN RODEO ASSOCIATION 2024 MEMBERSHIP APPLICATION

Be sure to fill out the form **COMPLETELY** and **LEGIBLY** to avoid delay in processing application.

NAME: _____ SRA CARD NO: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) _____ DATE OF BIRTH: ____/____/____ Last 4 digits SOCIAL SECURITY#: _____

EMAIL: _____

MEMBERSHIP DUES Valid 01/01/24 thru 12/31/24.

Competing Memberships: ☐ New Card \$150 ☐ Renewal Card \$150 ☐ Stock Contractor \$150

☐ Gold Card (50+ years old with 10 consecutive years as SRA member. Proof of age required.)

☐ High School Senior Card (enclose copy of current NHSRA card & proof of being High School Senior)

Non-competing Memberships: ☐ Labor Card \$50 ☐ Timer Card \$25

*Labor & Timer cards are for rodeo personnel that do not compete. A Permit Fee will be charged when competing in an event at each rodeo.

CHECK ALL EVENTS & POSITIONS TO BE WORKED:

<input type="checkbox"/> Bareback	<input type="checkbox"/> Steer Wrestling	<input type="checkbox"/> Stock Contractor	<input type="checkbox"/> Announcer
<input type="checkbox"/> Saddle Bronc	<input type="checkbox"/> Team Roping	<input type="checkbox"/> Judge	<input type="checkbox"/> Pickup Man
<input type="checkbox"/> Bull Riding	<input type="checkbox"/> Barrel Racing	<input type="checkbox"/> Timer	<input type="checkbox"/> Bull Fighter
<input type="checkbox"/> Calf Roping	<input type="checkbox"/> Breakaway Roping	<input type="checkbox"/> Secretary	<input type="checkbox"/> Clown/Specialty Act

I, the undersigned, make application for membership in the Southern Rodeo Association (SRA) and I hereby agree to be bound by and to conduct myself in accordance with the rules established by the SRA. I agree that I will enter all contests at my own risk, that I will make no claims to the SRA or to any affiliated individual or organization for injuries, loss, destruction, or theft to me or any of the property in my care. I agree that I and I alone will be responsible for myself and all property for which I bring to the rodeo. I am aware of the risk involved and know that an injury can occur from the participation in the sport of rodeo, for valuable consideration; the receipt of which is hereby acknowledged by all parties, do hereby and forever discharge all the members of the SRA, producers, stock contractors, sponsors, committees, land owners and lessees of premises from any and all claims, demands, suits, actions, or causes of action which I may, can or shall have reason for any participation in the SRA.

Signature _____ Date _____

If under 18 years of age, parent or legal guardian must complete and have notarized the following:

I, _____, the undersigned parent/legal guardian of the above applicant, consent to membership.

Signature _____ Date _____ Sworn & subscribed before me this the ____ day of _____, 20____.

Notary Public _____ My commission expires _____ Affix Seal Here

***A \$5 convenience fee (**cash only**) will be added when purchasing card at rodeo.

Enclose check/money order and mail application to:

SOUTHERN RODEO ASSOCIATION
PO BOX 669
FOUR OAKS NC 27524

SRA OFFICE USE ONLY REC'D: _____ SRA: _____ RSN: _____