HIGH SCHOOL AFFIDAVIT

• FIRST YEAR NIRA MEMBERSHIP APPLICANTS ONLY •

1. All new NIRA members must complete this high school affidavit, or send an official high school transcript with the graduation date indicated on the official transcript.
2. Each NIRA member will have six (6) consecutive NIRA years of eligibility to compete from the date of his/her graduation from high school. If the prospective member received a general education degree, eligibility will be determined from his/her 18th birthday.
3. This affidavit must be verified and signed by **your current college registrar or your high school principal.**

☐ I verify that: _____ College/University, **DID** graduate
from: _____, High School, on this date _____.

☐ I verify that: _____ College/University, **DID NOT**
graduate from high school, but received a General Education degree on this date: _____.

Printed Official Name: _____ Signature: _____

Title: _____ Date: _____

MAIL TO: **NIRA - 2033 WALLA WALLA AVENUE - WALLA WALLA, WA 99362**

NIRA 2018/2019 - INDIVIDUAL MEMBERSHIP APPLICATION

$260.00 Membership (If attending member school)

1) **COMPLETE ENTIRE APPLICATION.** Incomplete or non-legible applications will be placed on hold, and you will not be able to compete until your membership is complete.
2) **DEADLINES EXIST.** It is your responsibility to know each regional rodeo deadline. Contact your regional directors for this information. If your membership is on hold you will not be eligible to compete.
3) Enclose school check, money order, or cashier's check drafted on United States bank (only) **NO PERSONAL CHECKS ACCEPTED.**
4) Enclose a signed high school affidavit with affixed seal, or an **OFFICIAL** high school transcript if you are applying for your first NIRA card. **NO** faxes, emails or photocopies accepted.
5) Enclose an **OFFICIAL** transcript from each institution attended, **INCLUDING ANY COLLEGE COURSES TAKEN IN HIGH SCHOOL.** NO faxes, emails or photocopies accepted.
6) Enclose a signed Certificate of Clearance. Can be faxed or emailed if necessary.
7) If the college you are currently attending is **NOT** listed on the back of this application, was not a members school in 2017/2018, or is not a member school for the 2018/2019, you must have the college President or Dean of Students sign the statement on the back of this application, and you must pay an additional $5 for RAWHIDE. Please check box below in the money remitted section.
8) **SIGN APPLICATION.** If under 21 years of age your parents or guardian must also sign the release of liability.
9) Coach/Advisor Signature is mandatory for students attending member schools.
10) Mail all completed information to: **NIRA, 2033 Walla Walla Ave., Walla Walla, WA 99362**
11) Faxes and emails are **ONLY** accepted on student, parent, and coaches signatures.
12) **OFFICIAL** transcripts means through the mail on hard copy transcript paper.

TYPE OR PRINT CLEARLY

NIRA# _____ Social Security # _____

Full Name: Last _____ First _____ Middle _____

Mailing Address: _____ City _____ State _____ Zip _____ Phone Number (___) _____

Permanent Address: _____ City _____ State _____ Zip _____ Phone Number (___) _____

Mail Publication to: ☐ Mailing Address ☐ Permanent Address E-mail address _____ Cell Phone (___) _____

Date of Birth: ___ / ___ / ___ Age _____ Marital Status: ☐ Married ☐ Single Gender: ☐ Female ☐ Male College Attending Cuesta Community College

Current Classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate Coaches Name Clint Pearce

Major course of study: _____ **Must Have Rodeo Advisor/Coach's Signature:** Digitally signed by Clint Pearce Date: 2018.07.06 11:27:07 -07'00'

Have you ever taken any college courses? ☐ YES ☐ NO (Must include official transcripts from all institutions attended. Including any during High School. Must have 2.0) Were you a 2017-2018 NIRA Member? ☐ YES ☐ NO

Did you attend college this previous term? ☐ YES ☐ NO Have you ever held a NIRA card before? ☐ YES ☐ NO

WAIVER OF CLAIMS

Claims for injury or death. I acknowledge that rodeo is inherently dangerous and creates risks of personal injury, including injury resulting in death, and damage to personal property, including livestock. I do hereby acknowledge that I am aware of these risks and the fact that they cannot be completely eliminated even with the utmost care. I agree that when participating in NIRA events I will use caution and due care to reduce these risks. I assume the risk of personal injury, death, and damage to my personal property, and I hereby waive the right to assert any and all claims I may have against the NIRA, its officers, directors, employees, agents, NIRA members, contract personnel, and sponsors, arising out of my participation and attendance at any NIRA event.

Claims for intellectual property rights. I acknowledge that the NIRA has the exclusive right to photograph, film, record, televise, broadcast, or otherwise reproduce, advertise, publicize, exhibit, and display all NIRA sanctioned events for commercial purposes. In consideration of the rights and privileges I have as a member of the NIRA, I hereby grant the NIRA the right to use my name, voice, picture, and any other image, including any recording by any method, of my participation in any NIRA event, for commercial or any other purposes, and I hereby waive the right to assert any claim against the NIRA and its assignees arising out of the use of my name, voice, likeness, etc., as described above.

Other claims. I acknowledge that by becoming an NIRA member I have read and agreed to abide by the by-laws and rules of participation of the NIRA that are applicable to me. I hereby waive the right to assert any and all claims I may have against the NIRA, its officers, directors, employees, agents, NIRA members, and sponsors, arising out of the enforcement of the NIRA by-laws and rules of participation, including the by-laws and rules concerning eligibility and disciplinary action.

INDEMNIFICATION AGREEMENT

I agree to indemnify the NIRA, its officers, directors, employees, agents, NIRA members, contract personnel, and sponsors, for any costs, expenses, and attorneys' fees incurred as a result of my breach of the agreements to waive the claims set forth above.

By my signature I acknowledge and represent that I have read, understand, and agree to the above Waiver of Claims and the Indemnification Agreement.

By signing this application, I am agreeing to the following provisions:

- **APPLICATION UNDERSTANDING AND REFUND POLICY**
  - NIRA membership dues are **$260.00** per NIRA year. This includes membership fees, medical insurance coverage, Collegiate Arena subscription, and an awards assessment fund of $25. Medical insurance provided by NIRA is mandatory and is excess over any valid and collectible insurance. If the school you are attending is not listed on the back you must pay an additional $5.00.
  - NIRA belt pins are available for $10.00 each.
  - ***Refund Policy*** **I understand that if I am declared ineligible to obtain a NIRA card or if I void my card, I will not receive a refund.**

☐ **Enclosed** is $260.00 for dues ☐ **Enclosed** is $10.00 for Rulebook (note: Free copy is available on collegerodeo.com)
☐ **Enclosed** is $10.00 for NIRA belt pin ☐ **Enclosed** is $5.00 for RAWHIDE (Non-member Schools)

TOTAL REMITTED $ 1

• **ACKNOWLEDGED AND AGREED TO BY:** X _____ PARTICIPANT, on this _____ day of _____. 20 _____

If applicant is under 21 years of age, both parent(s) or guardian(s) must execute the following addition to the above: **WE HEREBY FULLY ACCEPT THE TERMS OF THIS FULL RELEASE AND ACKNOWLEDGEMENT OF RIGHTS AND AGREE TO BE FULLY BOUND THEREBY ON BEHALF OF PARTICIPANT. ACKNOWLEDGED AND AGREED TO BY:**

_____ PARENT(S) OR GUARDIAN(S) OF PARTICIPANT UNDER THE AGE OF TWENTY-ONE YEARS.
on this _____ day of _____, 20 _____.

_____ PARENT(S) OR GUARDIAN(S) OF PARTICIPANT UNDER THE AGE OF TWENTY-ONE YEARS.
on this _____ day of _____, 20 _____.

OFFICE USE ONLY

NIRA# _____

Region _____ School _____
Class 1 2 3 4 5
Board Member _____
Amount Enclosed $ _____
Pin _____ Rulebook _____
Rawhide _____
Other _____
CR page _____
MO / CC / SC / PC / CASH

Yr _____ HS _____

Hrs _____ GPA _____ C S Q

A - HSAffidavit	C - Clearance
B - Missing Info.	CS - Coaches Sig.
D - DNC	E - NE / 12
F - 4th YR	G - GPA < 2.
H - NEH	I - I / L
N - NME	M - NEM
NT - Not Taken	O - Old App.
Q - App. Sig.	P - Pers. Ck.
RP - Rel. Parent	R - Rawhide
S - Pres. Sig.	RS - Rel. Sig.
TC - Transcript	TO - Transfer / Office
V - Void Card	WD - Withdrawn
W - No WIPF	YT - Prior Taken
Y - 6 Yr. RL	
SS - School Standing	