



California High School Rodeo Association

2019-2020 MEMBERSHIP APPLICATION

website: www.chsra.com

PLEASE FILL OUT COMPLETELY AND NEATLY

Name:	M () F ()
Mailing Address:	
City, State, Zip	
Physical Address: (if different from above)	
City, State, Zip Paren	Email:
Home Phone: Paren	t Cell Phone:
Date of Birth:Age:	_ Parent Email:
Are you a returning NHSRA High School member? YES	
	High School, currently enrolled in grade 9 10 11 12 (circle one)
and your dues, points and point standings forfeited.	on or entry forms, your membership is automatically terminated
Signature of Student	Date:
Signature of Parent/Guardian	Date:
2019-2020 Fees: \$165.00 (National AND State d	ues and fees)
**********	***********
*****CERTIFICATION OF ELI	GIBILTY (to be filled out by school)*****
I do certify that this student meets GRADE AND CONDI	JCT qualifications of the California High School Rodeo Association
	minimum of 5 weeks) and must be passing in minimum of 4
classes/subjects or if less that 4 classes, must be passir	ng ALL with a 2.0 GPA)
is one	alled in
(Student name)	olled in(High School Name)
County of and as c	of the last grading period the following applies:
Please mark on of the following that applies to the abo	
[] 2.0 GPA or better as of the last grading period	
and 4 passing grades	earn a 2.0 or better on the next grading
	period to participate in rodeos)
(Signature of Principal, Counselor or Registrar)	(Position or title AND telephone number) (school seal)
Please contact your district membership secretary	if you have any questions
Membership Secretary Name:Email	: Number:
Address:Phone City, State, Zip	Number:



Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	2 Business name/disregarded entity name, if different from above		
Print or type. Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Che following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	eck only one of the	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)
ty ty	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner	ship) ▶	
Print or type c Instruction	Note: Check the appropriate box in the line above for the tax classification of the single-member ow LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the orangement another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sing is disregarded from the owner should check the appropriate box for the tax classification of its owners.	wner of the LLC is le-member LLC that	Exemption from FATCA reporting code (if any)
cifi	Other (see instructions)	J.	(Applies to accounts maintained outside the U.S.)
Spe	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name a	and address (optional)
See			
0)	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		
Par	Taxpayer Identification Number (TIN)		
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo		curity number
reside	up withholding. For individuals, this is generally your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>		
TIN, la	ater.	or	
	If the account is in more than one name, see the instructions for line 1. Also see What Name a	and Employer	identification number
Numb	per To Give the Requester for guidelines on whose number to enter.		-
Par	t II Certification		
Unde	r penalties of perjury, I certify that:		
2. I ar Ser	e number shown on this form is my correct taxpayer identification number (or I am waiting for a m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest of longer subject to backup withholding; and	I have not been n	otified by the Internal Revenue
3. I ar	m a U.S. citizen or other U.S. person (defined below); and		
4. The	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	g is correct.	
		., .	

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid,

	1 1 27	ributions to an individual retirement arrangement (IRA), and generally, payments on, but you must provide your correct TIN. See the instructions for Part II, later.
Sign Here	Signature of U.S. person ▶	Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

2019-2020 CHSRA GRADING PERIOD REQUEST

California High School Rodeo Association requires all members to maintain *BOTH* a 2.0 GPA as of the latest grading period (minimum 5 week) *AND* at least 4 passing subject grades or if less than 4 subjects, must be passing in all with a 2.0 GPA. If these qualifications are not met, you will NOT be allowed to rodeo until the next grading period shows that you have met the qualifications. The grading period must end prior to close of entries.

Grades that are not current or have not met the above stated qualifications will not be allowed to check in at the rodeo. NO EXCEPTIONS! This rule will be strictly enforced. This is a state and national rule.

Please have your school complete this form so we can monitor your progress and grading periods.

Student's name:		
School Name:		_
School Address:		
School phone number:		•
Diagram in disease if	l december.	
Please indicate if you are semester or		
End of grading period dates:	рате керогт Са	rds will be mailed/emailed/sent home (circle one)
1	1	
2	2	
3	3	
4	4	
Progress reports dates: Place an X here if your school does n		eports will be mailed/sent (circle one)
1	1	
2	2	
3	3	
4	4	
Place an X here if progress reports	are sent to EVERY STUDENT IN	I EVERY CLASS
		nd we greatly appreciate any information ce a success. Thank you for the support
Members, please send this form and all pr	rogress and report cards to:	SCHOOL SEAL HERE

California High School Rodeo Association PO Box 279 Arroyo Grande, CA 93421

2019-2020 SOCIAL MEDIA POLICY

In accordance with 2018 – 2020 Rules, By-laws and Constitution, National High School Rodeo Association, Article II: Membership Associations - Membership, 16. "NHSRA membership associations shall have the authority to require signature agreements to Social Media Policies for student and adult members, as a requirement of membership. The purpose of said policies is to protect the membership association and its official representatives from inaccurate, detrimental, threatening, harassing and derogatory information, as well as from creating unauthorized websites and social media accounts utilizing the association name, whether directly or indirectly."

As a condition of membership in CHSRA (the "California High School Rodeo Association"), the undersigned understand that the California High School Rodeo Association requires student, parent and adult non-parent members to agree not to post on line any comments about the National High School Rodeo Association, the California High School Rodeo Association, and/or its official representatives that are inaccurate, detrimental, threatening, harassing and/or derogatory, as well as to agree not to create unauthorized websites and social media accounts utilizing the California High School Rodeo Association name, whether directly or indirectly.

We further understand that failure to abide by this agreement by **either** adult members, parent(s) **or** student member(s) will result in immediate revocation of all the undersigned's adult **and** student memberships in the California High School Rodeo Association, including any points awarded in the current [2019-2020] rodeo season. This revocation of membership shall not, however, preclude the California High School Rodeo Association from bringing a claim against an adult member, parent or a parent on behalf of their minor child(ren) who is a member(s), for appropriate damages caused by the actions of either the parent, adult non-parent or student. By signing below, the undersigned agree to this Social Media Policy.

(California High School Rodeo Association Parent),

(California High School Rodeo Association Parent)

(California High School Rodeo Association Parent),

(California High School Rodeo Association Associate Member).

The foregoing Social Media Policy agreement is hereby accepted:

California High School Rodeo Association, Inc.

By:

Title

Date

2019-2020 CALIFORNIA HIGH SCHOOL RODEO ASSOCIATION and JUNIOR HIGH RODEO DIVISION ASSOCIATE MEMBERSHIP FORM

**EACH MEMBER IS REQUIRED TO HAVE AT LEAST ONE ASSOCIATE MEMBER'	**FACH MFMI	BER IS REQUIRED) TO HAVE AT I	FAST ONE ASSO	CIATE MEMBER*
--	-------------	-----------------	----------------	---------------	---------------

ASSOCIATE MEMBER NAME:		::	DISTRICT #	
ADDRESS			CITY	
STATE	ZIP	EMAIL	PHONE	
\$ 10.00 CHS	RA ASSOCIATE	MEMBER FEE		
\$ DIS	TRICT FEE (IF AI	PPLICABLE)		
\$ DIS TO T	TAL (TO BE PAID	TO YOUR DISTRICT)		
A	ASSOCIATE MEI	MBER'S RELEASE, ASS	UMPTION OF RISK AND INDEMNITY AGREEMENT	
		The state of the s	e granted permission (1) to enter the restricted area, (2) to participate as an assistant, plicable, as limited by the master policy (all collectively hereinafter called "permissive")	
	•	•	restricted area, which is the area from which admission to the general public is restricted, nutes, pens, adjacent walkways, heirs, next of kin, spouses and assigns do hereby:	
them, their officers ordinary negligence severally, and in co	s, agents and employee e of releasees or any o	es (all hereinafter collectively refe ther participant which causes the old releasees harmless and to ind	e, stock contractor, rodeo association, sponsors, arena operators or owners, and each of erred to as "releasees") from any and all claim and liability arising out of strict liability or e undersigned injury, death, damages or property damages. We, the undersigned, jointly, emnify releasees from any claim, judgment, expenses releasees may incur arising out of an	
arena change from which we each app undersigned furthe the associate. We f	time to time and may reciate and voluntarily er understands that the further understand tha	become more hazardous, that ro assume because as associate more arena surface, access ways or la t other contestants and participa	ntains DANGER AND RISK OF INJURY OR DEATH TO ASSOCIATE, that conditions of the rodeo odeo animals are dangerous and unpredictable, and that there is INHERIT DANGER in rodeo embers we choose to do so. The undersigned has observed events of the rodeo type. The ick thereof, lighting or lack thereof, and weather conditions all change and pose a danger to ints pose a danger to the associate, but nevertheless, WE EACH VOLUNTARILY ELECT TO area and/or participation in any rodeo events.	
THEREAFTER or unit shall amplify, but sl	til the associate's mem hall in no way limit the	bership expires, whichever shall provisions of this document. Th	ccident or death occurring on the above date and FOR A PERIOD OF ONE (1) YEAR last occur. All subsequent agreements and release documents signed by the undersigned e provisions of this document may be cancelled by any one of the undersigned by delivering chishall be effective 24 hours after the date said cancellation is actually received by the	
		=	REE TO INDEMIFY the releasees and each of them from any loss, liability, damage or costs scribed activities whether caused by the negligence of the releasees or otherwise.	
I HAVE READ THIS	DOCUMENT; I UNDER	STAND IT IS A RELEASE OF ALL C	LAIMS.	
I APPRECIATE AND	ASSUME ALL RISKS IN	IHERENT IN RODEO		
	re of Associate Membe so needed if under the		Date	

PO Box 279 Arroyo Grande, CA 93421

Member N	ame:District:	
Address:		
City, State,	Zip Code:	
Phone Nun	nber:	
******	*****************	*********
CHSRA	HEADS UP CONCUSSION INFORMATION ACKNOW A STATE POLICY MANUAL AND STATE BY-LAWS AC	
I acknowled read the for	edge that I, bllowing:	, have received and
2.	CHSRA Concussion Information Packet CHSRA State Policy Manual (www.chsra.com) CHSRA State By-Laws (www.chsra.com)	
Signature_	(Parent or guardian must sign, regardless of age of contestant.)	Date
Signature_	(Cartantan)	Date
	(Contestant)	
*****	*****************	*******

CONCUSSION INFORMATION SHEET

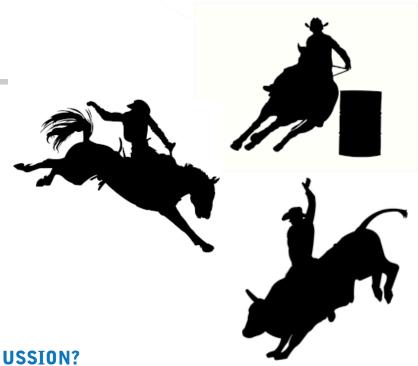


This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' rodeo, events and practices to learn how to spot a concussion and what to do if a concussion occurs.



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.



HOW CAN I SPOT A POSSIBLE CONCUSSION?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

SIGNS OBSERVED BY PARENTS, DIRECTORS OR JUDGES

- Appears dazed or stunned.
- Forgets their turn, is confused about the rodeo or is unsure of an event, time, or score.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can't recall events prior to or after a hit or fall.

SYMPTOMS REPORTED BY CHILDREN AND TEENS

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
 Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

WHAT ARE SOME MORE SERIOUS DANGER SIGNS TO LOOK OUT FOR?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even
 a brief loss of consciousness should be taken seriously.

WHAT SHOULD I DO IF MY CHILD OR TEEN HAS A POSSIBLE CONCUSSION?

As a parent, if you think your child or teen may have a concussion, you should:

- 1. Remove your child or teen from the rodeo.
- 2. Keep your child or teen out of their events the day of the injury. Your child or teen should be seen by a health care provider and only return to competition with permission from a health care provider who is experienced in evaluating for concussion.
- 3. Ask your evaluating health care provider for written release instructions for your child or teen return to rodeo competition.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to rodeo practice and competition should be a gradual process that is carefully managed and monitored by a health care provider.

HOW CAN I HELP KEEP MY CHILDREN OR TEENS SAFE?

Rodeo is a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - >> Teach ways to lower the chances of getting a concussion.
 - » Talk with your children or teens about concussions and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
 - » Ensure that they follow the CHSRA/NHSRA rules for safety and the rules of the sport.
 - >> Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for their events, teach your children or teens that wearing a helmet can lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.





TO LEARN MORE GO TO >> cdc.gov/HEADSUP

JOIN THE CONVERSATION AT

➡ www.facebook.com/CDCHEADSUP

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