



National Little Britches Rodeo Association of Michigan

www.nlbraofmi.com

New Member Information



Name _____ **Date** _____

Address _____

City, State, Zip _____

Birth date _____ **Current Age** _____

Graduation Year _____

E-mail address _____

Phone Numbers – Home _____ **Cell** _____

Mother's Name _____ **Father's Name** _____

Have you participated in rodeos before? **Yes** **No**

Would your parents be willing to help out during rodeos? **Yes** **No**

How did you hear about NLBRA of MI? _____

Please bring form to rodeo and turn in to either:

Rodeo Secretary or Trail Hand Director