NCHSRA/NCJHRA ConductForm



A STATE OF	

Contestant Name:		
Rodeo Event:		
NCHSRA/N	CJHRA PUBLIC SCHOOL FORM	
QUALIFICATIONS (Passing grades in four contestant is on a block schedule, then of	Il High School Rodeo Association's GRADE and CONDUCT (4) subjects or all subjects if taking less than four (4). If a contestant must pass at least five (5) subjects for the year. block schedule, then all five (5) subjects need to have a	
Signed:		
(Superintendent, Principal,	Designee or National Director)	
NCHSRA/I	NCJHRA HOMESCHOOL FORM	
PLEASE CHECK THE ONE	THAT APPLIES	
My child is enrolled in a home school program that is registered with the my state's Department of Education.		
**************************************	omeschool program that is NOT registered with my ducation. **Please attach verification of grade	
	uired National High school Rodeo Association dabove) to be eligible to participate in the	
Parent:		
MEDI	CAL TREATMENT RELEASE	
medical facility and their physicians ar EMERGENCY treatment for injuries he/School & Jr. High Rodeo Association Roand is covered by medical insurance. Won medical staff, rodeo sponsors, promo	, give the local hospital and/or and medical staff permission to administer NECESSARY she may incur while participating at the North Carolina High deo Event. We understand that each contestant must be de hereby release the hospital, medical facility, physicians of the standard Members, sign this form for EACH NCHSRA/NCJHRA Rodeo Event	
Parent:	Date:	
Parent:	Date:	
Contestant:	Date:	