## OREGON JUNIOR HIGH DIVISION

MEMBERSHIP APPLICATION—2023-202 Full Name			N—2023-2024	NJHD#	
Cell Number if available			(to be completed by state secretary)		
Shirt Size	Coat Si	ze			
SCHOOL OFFICIAL	MUST SIGN THIS VERIFIC	ATION:			
School					
	Email				
Grade in School	_School's Grading Period:	Quarterly	Trimester	Semester	Other
Association's GRADE A standing; not ruled und	rements and behavior standard AND CONDUCT qualifications. esirable for misconduct at schoe proof of enrollment from an	(Current grade and olare or have pa	conduct requirer ssing grades in f	ments onlyStudents our subjects) <b>Home</b>	s must be in good schooling
Signed:				Date:	
	(Superintender	nt, Principal, Counseld	or, or Secretary)		
BOTH PARENTS/GU	JARDIANS MUST SIGN TH	IS VERIFICATIO	N:		
I certify that	isyears of ag	ge. His/her birth da	te being the	_day of	,(year).
staff of the hospital, and treatment for injuries he Oregon. We understand physicians on the medi- negligence.WE HAVE I	s/Guardians ofd or advance emergency care in e or she may incur while participed that each contestant must be cal staff, emergency-care indiving READ THIS DOCUMENT, AND SUME ALL RISKS INHERENT	ndividuals (EMT or operating in any OREG and is covered by r duals, rodeo spons WE UNDERSTAN	equivalent) to add ON JUNIOR HIC medical insuranc ors, and stock co	minister NECESSAF GH DIVISION approve. We hereby releas ontractors from all lia	RY EMERGENCY yed rodeos in e any hospital, bility, except with
X		x			
(Parents or guardians r	nust sign, regardless of age of o	contestant)			
Please UPLOAD to NI	ISRA MEMBERSHIP PORTAL	and MAIL ORIGIN	NALS to address	s below	
		l signatures are to b			

Mail to: **OJHD** 

C/O Kelli Rose 35694 Embree Bridge LN Burns, OR 97720