



ASGRA MEMBERSHIP APPLICATION
Mail to: ASGRA; PO Box 21519; Washington, DC 20009
(PLEASE PRINT CLEARLY)

NAME: (MR/MS) _____ Alias: _____
ADDRESS: _____ Apt. #: _____
CITY: _____ STATE: _____ ZIP (+4) _____ Membership #: _____
EVENING PHONE: _____ DAY PHONE: _____
EMAIL: _____ DATE OF BIRTH (Optional): MO: ____ DAY: ____ YEAR: ____

(If you do NOT wish to receive email, do not fill in this line.)

Listing in Newsletter: Full Name ____ First Name, Last Initial ____ Alias ____ DO NOT Print my name ____

LEVEL OF MEMBERSHIP: (All levels receive 1 vote per person in ASGRA business, 1 copy per address of *Thirteen Spurs*)

New Individual Regular (July 1-June 30): \$30 ____ (with **no** badge) \$40 ____ (includes \$10 badge fee)
- Joining between January and June: \$15 ____ (with **no** badge) \$25 ____ (includes \$10 badge fee)
New Family Regular (July 1-June 30): \$55 ____ (with **no** badge) \$75 ____ (includes \$10 badge fee...per badge)
- Joining between January and June: \$25 ____ (with **no** badge) \$45 ____ (includes \$10 badge fee...per badge)
Renewal Individual (July 1-June 30): \$30 ____ (with **no** badge) \$40 ____ (includes \$10 badge fee)
Renewal Family (July 1-June 30): \$55 ____ (with **no** badge) \$75 ____ (includes \$10 badge fee...per badge)

(Family membership is for any 2 people living at the same address)

Silver Spur: \$125 (annually) ____ Listing in the Stampede Rodeo Program, Name Badge and Silver Spur Name Badge Hanger.
Golden Saddle: \$425 (annually) ____ Listing in the Stampede Rodeo Program, Name Badge and Golden Saddle Name Badge hanger.
Lifetime: \$600 ____ Lifetime membership name badge, Listing in the Stampede Rodeo Program ASGRA Association buckle (special order).

Business: \$200 ____ (annually)

¼ page Stampede Rodeo Program Ad, Identified in Rodeo Program as an ASGRA Business Member, Web link on the ASGRA web page, *Thirteen Spurs* listing identifying the business as an ASGRA Business Member.

Name on Badge: (18 character-limit, including spaces) _____

Name on Badge: (18 character-limit, including spaces) _____

Interested in becoming more involved in ASGRA? Please indicate the committees in which you are interested in participating in.
 Fundraising; Public Relations; Membership; Newsletter; Rodeo Events and Training; Social and Entertainment

THIS FORM AND WAIVER MUST BE SIGNED AND DATED TO BE VALID!

By signing this waiver, I agree to conduct myself to conform to the bylaws and standing rules of ASGRA and any rules and regulations duly adopted by the directors, officers, committees, or membership of ASGRA. I further agree in connection with my participation or attendance in or at any event held by or for the benefit of ASGRA to always comply with all applicable laws. I acknowledge that failure to honor the commitments set out may be cause for termination of my membership. I acknowledge that failure to pay all dues or assessments, if any, shall give rise to termination of my membership. I hereby agree to protect and lay harmless ASGRA from any and all damage, injury, or death, which might occur to my property or person in preparation for, during, at or immediately following any function held by or for the benefit of ASGRA and also from any and all liability whatsoever in regard thereto whether any cause of action may occur to me, my executor administrator, or assigns.

Applicant's Legal Signature: _____ Date: _____

TO RENEW BY CREDIT CARD:

VISA: _____ MC: _____ AmEx: _____

Print Name as it appears on Card: _____

Card Number: _____

Exp. Date: ____/____/____

Card Holders Signature: _____

For Office Use Only Amount Enclosed \$ _____ Check #: _____ Date Received: _____ By (init.): _____