



2026-2027 MEMBERSHIP APPLICATION



AGE DIVISIONS AGE AS OF **SEPTEMBER 1st, 2026**

PEEWEE (AGES3-6), JUNIORS(AGES7-9), SENIORS(AGES10-13), TEENS(14-18), ELITES(7-22)

SUBMIT MEMBERSHIP APPLICATION VIA EMAIL to rodeo@qcjra.org

DO NOT SUBMIT PAYMENT. MEMBERSHIP PAYMENT WILL BE MADE AT TIME OF ENTRY.

- \$40.00 ANNUAL MEMBERSHIP FEE PER CONTESTANT
- \$100.00 ANNUAL FAMILY MEMBERSHIP FEE (3 OR MORE KIDS)
- NON-MEMBER FEE PER RODEO \$25.00 PER WEEKEND

NON-MEMBER: Allows contestants to compete one weekend at a rodeo, but only for those awards at that rodeo, no yearend points will be given, unless full membership is purchased prior to competing at that rodeo.

****Each member is responsible for a MANDATORY Sponsorship fee \$250 to qualify for end of year awards & membership jackets. This can be through selling raffle tickets or a sponsorship. ****

CONTESTANTS NAME(S), AGE(S), DATE OF BIRTH(S):

NAME: _____ AGE: _____ DATE OF BIRTH: _____

NAME: _____ AGE: _____ DATE OF BIRTH: _____

NAME: _____ AGE: _____ DATE OF BIRTH: _____

NAME: _____ AGE: _____ DATE OF BIRTH: _____

A photocopy of your birth certificate must be enclosed with this application unless you were a member last year. You must fill out the W-9 and return to rodeo@qcjra.org

PARENTS OR GUARDIAN INFORMATION

MOTHER/GUARDIAN: _____

FATHER/GUARDIAN: _____

ADDRESS: _____

CITY: _____ AZ: _____ ZIP: _____

PHONE: _____ 2ND PHONE: _____

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: ____/____/____

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: ____/____/____

As a responsible adult of a contestant in any Queen Creek Junior Rodeo sponsored event, I/we hereby agree to abide by all rules and or rulings set forth or made by QCJRA and shall hold harmless, and shall not in any way hold QCJRA, its members, officers, directors, volunteers, sponsors, representatives, and any arena operator, arena owner, or any person sponsoring and or participating any QCJRA event responsible or liable for any accident or injury which may occur during any QCJRA event and or rodeo either as a spectator, participant or in any other capacity. I/we acknowledge that this membership application has been read, understood and is completely and truthfully accurate.

NOTARY:

SUBSCRIBED & SWORN BEFORE ME THIS _____ DAY OF _____, 20_____

MY COMMISSION EXPIRES _____ NOTARY PUBLIC IN AND FOR THE COUNTY OF _____

NOTARY SIGNATURE: _____