

Office Entered: \_\_\_\_\_

# Central Washington Ropers & Riders Association

## 2024 Membership Form

### Mail Application to:

CWRRA

P.O. Box 263 Buena, WA 98921

DATE:

Name:

Address:

City, State, Zip

**EMAIL: Please print clearly so you will receive our emails**

Phone:

Membership Name(s):

Date of Birth

Age  
(as of 1/1/24)

### **MEMBERSHIP FEES:**

Individual Membership: \$45.00 \_\_\_\_\_

Family Membership: \$75.00 \_\_\_\_\_

**\*A family membership is defined as 4 Members- Parent/guardian and their said children under 18.**

### **LIVING IN SAME HOUSEHOLD**

Additional Household Members \$10.00 \_\_\_\_\_

- This is an award series. To be eligible for year-end awards, you must be a paid member and attend a minimum of 5 of the 10 event days. (Please note: You do not need to be a member to compete at these rodeos, therefore non-members will not be eligible for year-end awards.)
- Membership and Fees must be received and paid PRIOR to the start of the first rodeo you wish to enter to have points count towards year-end awards.
- Payment in full is required with this application.
- Make checks payable to CWRRA.
- Membership Questions? Email GeGe Knapp at cwrra20@outlook.com

**\*A WAVIER MUST BE FILLED OUT AND NOTARIZED BEFORE YOU PARTICIPATE IN A CWRRA EVENT\***

### OFFICE USE ONLY

Date: \_\_\_\_\_ Check# \_\_\_\_\_ Cash Amount \$ \_\_\_\_\_ Initials \_\_\_\_\_