



MEMBERSHIP FORM

The Miss Rodeo Nebraska Association, Inc. was organized in 1992 to promote western culture in Nebraska. Through our annual events and fundraisers, we are able to assist our **Miss Rodeo Nebraska** and **Miss Teen Rodeo Nebraska** in their representation of Nebraska and the sport of rodeo by enhancing their speech, interview, modeling and horsemanship skills and to present generous scholarships to them to further their education. Your membership makes you an important part of this effort. You will be able to participate in each girl's journey from the moment she receives her title all the way through her year of travel and accomplishments. With prompt payment of your dues, it enables the Association to plan the programs for the coming year. Our mission statement aptly describes the purpose of this Association:

To provide an opportunity for young women of high moral and ethical character to promote Nebraska and the sport of rodeo.

Please fill out the form below and return it with your membership dues to:

Shari Schlichtemeier
512 East E Street
Ogallala, NE 69153

If you need additional information, please email: sharislick@opsd.org

RETURNING MEMBER – 2019

NAME: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

PHONE #: _____ CELL#: _____

EMAIL : _____

(Please write very legibly – we communicate almost exclusively by email. If you do not wish to be contacted by email, please check the box.)

\$35.00 General Membership - \$ _____

\$10.00 Youth (16 & under) Membership - \$ _____

\$50.00 Rodeo Membership - \$ _____

Plus \$5.00 fee to receive the newsletter by mail, \$ _____

(no fee to receive the newsletter by email)

TOTAL AMOUNT DUE \$ _____

Please indicate all committee(s) you would like to serve on:

_____ Queen Clinic	_____ Lil' Cowgirls
_____ Send-Off Style Show	_____ Sponsorship
_____ Scholarship	_____ Queen's Breakfast
_____ Other	_____ MRNA Officer

How many years have you been a member of MRNA? _____

Thank You!

NEW MEMBER – 2019

NAME: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

PHONE #: _____ CELL#: _____

EMAIL : _____

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_____ Send-Off Style Show	_____ Sponsorship
_____ Scholarship	_____ Queen's Breakfast
_____ Other	_____ MRNA Officer

WELCOME!