



# Professional Armed Forces Rodeo Association 2020 Membership Application



The Professional Armed Forces Rodeo Association (PAFRA) is a nonprofit organization and is in no way funded or affiliated with the U.S. Government or Department of Defense organizations or its agencies. All active duty members are responsible for obtaining permission from their respective commands to participate in any PAFRA or PAFRA co-sanctioned rodeo. Application to PAFRA does not in itself constitute acceptance into PAFRA. You will be contacted with your status at the soonest possible time. Membership dues must be paid by Money Order, Personal Check or Cashier's Check (payable to PAFRA).

**Current Active, Guard & Reserves MUST include a copy of a RECENT LES  
Veterans MUST provide a copy of DD 214 or NGB 22 (please black out SSN on documents)**

TYPE OF MEMBERSHIP	Early Bird Rates (Till Jan. 31, 2020)	Insert Rate Here
FAMILY MEMBERSHIP	All eligible family members may compete	\$110
INDIVIDUAL MEMBERSHIP	Competing Membership	\$75
ASSOCIATE FAMILY MEMBERSHIP	Non-Competing Membership for families	\$40
ASSOCIATE MEMBERSHIP	Non-Competing Membership	\$20
PAFRA BOOSTER	Non-Military/Non-Competing Membership	\$20
Gold Star Membership	Ten <u>CONSECUTIVE</u> years of membership only	\$55
<b>TOTAL BALANCE</b>		

**\*\*\*New Members – Application & Proof of Service Documents must be mailed to Secretary.**

**Renewing Members - Need only send any updated change of Status documents. i.e. Active to Veteran, Retiree or Part Time status.**

Money Order       Personal Check # \_\_\_\_\_       Cashier's Check

**Please Check:**  New Member  Renewing Member **CARD # (renewing members only):** \_\_\_\_\_

### CIRCUITS

Alaska       Rocky Mountain       Red River       Northeast  
 Pacific       Burning Sands       Southeast       European

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Rank: \_\_\_\_\_ DOS/ETS: \_\_\_\_\_

Dependent Spouse: \_\_\_\_\_ Dependent Child (18 an under): \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone/Other: \_\_\_\_\_

Email Address: \_\_\_\_\_ How did you hear about PAFRA: \_\_\_\_\_

Home Town: \_\_\_\_\_ State: \_\_\_\_\_ Duty Station: \_\_\_\_\_ State: \_\_\_\_\_

SHIRT SIZE: Small  Medium  Large  XL  XXL  XXXL

JACKET SIZE: Small  Medium  Large  XL  XXL  XXXL

### EVENTS (PLEASE CHOOSE ALL APPLICABLE EVENTS IN WHICH YOU PARTICIPATE):

- BULL RIDING       SADDLE BRONC       BAREBACK       BARREL RACING       TR HEADING
- BREAKAWAY       TIE-DOWN       CHUTE DOGGING       STEER WRESTLING       TR HEELING
- MOUNTED SHOOTING

# Family Membership Information

Shirts are in \*Youth, Male & Female sizes (\*youth sizes may not be available in some designs)

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

<b>Full Name:</b>
<b>Age:</b> <b>Competing:</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Contestant Shirt Size:</b>
<b>Event(s):</b>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By my signature, I verify that the above information is truthful, accurate and that I have read and will comply with the By Laws and Rules of the organization.*

Mail completed Application (2 pages), Proof of Service Documents & Amount due to:

**PAFRA Treasurer  
Attn: Laura Acevedo  
PO Box 106  
Hornbeck, LA 71439**