



UTAH STATE WRANGLER DIVISION- FIFTH AND UNDER MEMBERSHIP

Name: _____

Mailing Address: _____

City _____ Zip Code _____

Telephone () _____ Sex (circle one) Male Female

Email Address: _____

Date of Birth _____ Current Grade in School _____

Designate the Junior Association(s) you are a member of

Dues and Fees:

State Dues..... \$15.00

Read and Sign Below:

We certify that the information supplied in this application is true and correct to the best of our knowledge and belief and that the student applying for membership meets the qualifications, and criteria for membership in the Wrangler Division-Fifth and Under Age Group. By applying for and receiving membership, we hereby agree to follow all rules and guidelines set forth by the State and the Wrangler Division, and to abide by all decisions and rulings of the governing committees and boards of these associations.

Member Signature _____

Date _____

Parent/Guardian Signature _____

Date _____