Bronco Hockey Boosters, Inc.

Booster Club Membership Application

**General Membership Dues**

**Family Membership $20.00**

**Individual Membership $10.00**

**Senior Couple (age 65+) $10.00**

**Senior (age 65+) $ 5.00**

**Alumni / Faculty $ 5.00**

**BSU Students & Coaches: Free**

**PLEASE PRINT LEGIBLY**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY, STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LIST ADDITIONAL FAMILY MEMBERS & EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Membership in the Bronco Hockey Boosters (BHB) offers special opportunities to active supporters. There are a wide variety of activities and needs available and a place for everyone who wants to be involved.**

* **Support the student-lead Boise State Men’s Hockey Club**
* **Meet & Greet – meet the team at games and special events**
* **Black & Blue Rivalry Game – A major fundraiser for local Meals on Wheels recipients**
* **Winter Carnival – opportunities in McCall during winter carnival**
* **Road Trips – Travel to watch & cheer on the team**
* **Various Fundraising functions**

**As a Bronco Hockey Booster member, you agree to: 1) Support the mission and purpose of BHB as listed in the by-laws; 2) Contribute funds as you are able; 3) Participate in programs, events and activities; 4) Attend meetings; 5) Share ideas, knowledge, talents with BHB in supporting our mission.**

**Below is a list of some of the events and activities that BHB sponsors. Please check any in which you are willing to participate and help. We will make sure you are notified when specific opportunities of interest become available. You may change or add to your involvement with a committee at any time. The Boise State Hockey Club depends on us for support. With your the active support and involvement, we can accomplish our mission.**

**\_\_\_ Meet & Greet \_\_\_ Black & Blue Rivalry Game \_\_\_ Mentor Players**

**\_\_\_ Merchandise table \_\_\_ Winter Carnival \_\_\_ Work at games**

**\_\_\_ Membership \_\_\_ Sponsorships \_\_\_ Email & Social Media**

**\_\_\_ Help as needed**

**CLUB MISSION STATEMENT**

**The Bronco Hockey Boosters and its Board shall serve as a vehicle of communication between the student-athletes of the Boise Sate Hockey Club, its coaching staff, the Boise State faculty representative, the members of the Board and the surrounding community. The Boosters shall serve as a means of support for the Club as advisors and mentors while assisting with financial support and fundraising efforts. The Boosters shall promote and encourage the academic endeavors of its student-athletes while inspiring the pursuit of excellence in athletic performance and competition.**

**MEMBER AGREEMENT**

**As a member of the Bronco Hockey Booster Club, (hereafter known as BHB), I hereby agree to uphold the requirements of maintaining our mission statement in action and in deed, and accordingly, to maintain reasonable ethical behavior on all fronts and without expectation of preferential treatment from BHB or Boise State Hockey club players, coaches or BSU faculty, whether financial or otherwise. As a member and representative of BHB, I shall honor all rules of behavior set forth by the organization and will seek BHB board approval before acting as a BHB representative on any and all occasions. I also agree to uphold the good name and reputation of BHB at all times.**

**The signature below signifies that you have read and agree to the statement above.**

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**Signature of Adult Member Printed Name Date**

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**Signature of Adult Member Printed Name Date**

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| **Mail to:**  **Bronco Hockey Boosters**  **3122 Eastgate Dr**  **Boise, ID 83716**  **Contact:**  **Rocci Johnson**  [**Roccij@aol.com**](mailto:Roccij@aol.com) |  | **For BHB use ONLY**  **Form of Payment**  **Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Check Amount \_\_\_\_\_\_\_\_\_\_\_\_**  **Cash Amount \_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Treasurer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |