



ENTRY FORM

For office use only

NOTE: 1st Payment is \$175!

HORSE'S NAME: _____ LICENSE #: _____

BREED & REGISTRATION #: _____ SEX: _____ YEAR FOALED: _____

OWNER'S NAME: _____ ID#: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

PHONE: () _____ EMAIL: _____

TRAINER'S NAME: _____ ID#: _____

TRAINER'S PHONE: () _____ EMAIL: _____

PLEASE SEND PAYMENT BOOK TO:

Owner Trainer Other _____

RELEASE AND WAIVER OF LIABILITY

I, _____, (participant) in consideration of my participation in the equine event known as the NRHA Futurity and Championship Show hereby grant to the NRHA, the right to record, broadcast and otherwise exploit, in any and all media throughout the world, my performance in the event, and to use my and my horse's name, likeness, voice and biographical information in connection therewith.

I understand and am aware of the inherent risks associated with equine activities. I assume all risks associated with my participation in the event and hereby release and hold harmless the National Reining Horse Association, and sponsors and suppliers for the event, their respective directors, officers, employees, agents, successors and assigns, from and against any and all claims, damages, liabilities, costs and expenses including reasonable attorney's fees arising out of my participation in the event, including without limitation, any personal injuries or damage to my property which I may incur as a result of performing in a reining horse class.

I have read and understand the terms and conditions of the entry into this event and agree to abide by those terms and conditions and the NRHA Rules and Regulations.

I have the authority and hereby do, by making this entry, assume responsibility for and bind owner, rider and/or agent to the terms and conditions of this Release and Waiver of Liability.

I warrant that I am of legal age and that I have read and fully understand the foregoing terms.

Parent or Guardian's Guarantee

(Signature)

(Printed name)

(NRHA ID#)

(Phone)

(Date)

I, _____, represent and warrant that I am the parent or legal guardian of the participant named above, that I am of legal age and that I have read and fully understand the foregoing release and agree for participant's heirs, successors and assigns, and for participant's legal representatives to be bound by the terms thereof.

(Signature)

(Printed name)

(NRHA ID#)

(Phone)

(Date)

The following must accompany this form:

- Entry Fee—please send check or money order in U.S. funds made payable to NRHA. (See Futurity Conditions #5 for late fees.)

2012 NRHA membership for both owner (as listed on competition license) and rider is required. Membership must be paid in full.

FOR OFFICE USE ONLY	
Date Rec'd _____	
Paid \$ _____	Ck # _____ (\$ _____)

Mail to: NRHA, Attn: Futurity Entries
3000 NW 10th Street, Oklahoma City, OK 73107-5302