

Office Use Only:

2020 COLOR BREED CONGRESS® ABRA ENTRY FORM

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Pre-Entry & Stall Deadline, September 1, 2020

Mail, fax or email form to: Pinto Horse Association®, Congress Entries 7330 NW 23rd Street • Bethany, OK 73008 • Phone: 405-491-0111 Fax: 405-787-0773 • email: congress@pinto.org

Horse Name _____ Registration # _____

Year Foaled _____ Sex Mare Gelding Stallion

Owner Name _____

Is the owner a current ABRA member? Yes No* ABRA ID #: _____ **NSBA ID#: _____

*Owners and exhibitors must be current members of ABRA to compete at the Color Breed Congress®. (for dual approved classes only)

**Owners and exhibitors must be current members of NSBA to compete in dual approved classes.

Please include a copy of Horses Registration papers, owners & exhibitors ABRA membership, and NSBA card with your entry form.

Owner's Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

The Pinto Horse Association of America, Inc. Release, Assumption of Risk and Waiver This document waives important legal rights. Read carefully before signing.

I (We) hereby certify that every horse, owner and exhibitor is eligible as entered. I have read the Pinto Horse Association of America, Inc. (PHTA®) Release, Assumption of Risk, Waiver and Indemnification as printed in this entry form and agree to all of its provisions. I understand and agree that by entering this Competition, the owner and any of his representatives, agents, trainers, lessees, riders, drivers handlers and the horse shall be subject to and bound by the Pinto Horse Association of America, Inc. by-laws and rules and the rules of this Competition and will accept as final the decision of the show Disciplinary Committee on any question arising under said rules and agree to hold harmless the Pinto Horse Association of America, Inc. (PHTA®), the Competition, of officials, officers, directors, employees, independent contractors, agents, personnel, volunteers, the host city Convention & Visitors Bureau, the host facility, trade show vendors, sponsors and/or other sponsoring organizations, if any, for any action taken. I agree that any actions against the PHTA® must be brought in Oklahoma County, State of Oklahoma. Presentation of a signed entry form shall be deemed acceptance of these rules and other rules pertaining to this show. In the event of failure to sign an entry form, the first entry in a class will be deemed acceptance of said rules. BY SIGNING BELOW, I AGREE to be bound by all bylaws, rules, regulations, terms and provisions of the entry blank and competition rules and the current Official Rulebook for the Pinto Horse Association of America, Inc. I understand that refunds are given on entries or stalls according to the policy listed in the Premium Book. I understand all fees as listed, including but not limited to fees by date of postmark.

Signature: _____ Date: _____

Please complete the W-9 form

The IRS requires the PHTA® to obtain the correct taxpayer identification number (TIN) for persons for whom we have to file an information return (1099-Miscellaneous for premium payback or high point awards). If the correct TIN is not provided, subsequent payments can be subject to backup withholding per IRS regulations. NSBA and Cash Challenge Payout checks will not be issued until the PHTA® has a W-9 on file for all persons receiving a check. Therefore, you are required to complete the W-9 with the appropriate certifications when submitting this entry. This will prevent any delay of receipt of your payout check. Your exhibitor packet will be held if this section of the form is not complete.

The social security number listed on the W-9 should be that of the current owner/leasee or, in the case of multiple owners, one of the current owners listed on the Registration Certificate.

Form W-9 Request for Taxpayer Identification Number and Certification Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. 2 Business name/disregarded entity name, if different from above. 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3). 5 Address (number, street, and apt. or suite no.) See instructions. 6 City, state, and ZIP code. 7 List account number(s) here (optional).

Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. Social security number or Employer identification number.

Part II Certification Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 3. I am a U.S. citizen or other U.S. person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Sign Here Signature of U.S. person ▶ Date ▶

