2025 COLOR BREED CONGRESS® PtHA ENTRY FORM

Pre-Entry & Stall Deadline - October 1, 2025

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 Office Use Only:

Horse Name		Registration #						
Year Foaled								
Owner Name					PtHA	Membe	er ID #:	
Owner Name Is the owner a current PtHA m *Owners and exhibitors must **Owners and exhibitors must	be current	members of PtHA	to compete at the		ngress®.	A HORS	SE ID#:	
Please include a copy of NSE with your entry form.	BA Registr	ation papers and	owners & exhib	oitors NSBA mem	bership cards	s if exhi	biting in NSBA cl	asse
Owner's Address								
City								
Phone		E-	-mail					
I (We) hereby certify that every horse, owner and and agree to all of its provisions. I understand and Plinto Horse Association of America, Inc. by-laws the Pinto Horse Association of America, Inc. (PtH. show vendors, sponsors and/or other sponsoring or be deemed acceptance of these rules and other rule by all bylaws, rules, regulations, terms and provisi I understand that refunds are given on entri Signature:	agree that by enter and rules and the A®), the Competing rganizations, if an espertaining to thous of the entry by espertails according	ring this Competition, the own ules of this Competition and to tion, officials, officers, directo y, for any action taken. I agree s show. In the event of failure ank and competition rules and ording to the policy listed	ner and any of his representa will accept as final the decis rs, employees, independent that any actions against the to sign an entry form, the fi the current Official Rulebo in the Premium Book. I	tives, agents, trainers, lessees, on of the show Disciplinary Cc contractors, agents, personnel, PtHA® must be brought in Ok est entry in a class will be deem ok for the Pinto Horse Associatunderstand all fees as listed	riders, drivers handlers ommittee on any questi- volunteers, the host cit lahoma County, State ded acceptance of said to tion of America, Inc. 1, including but not	and the horse on arising und y Convention of Oklahoma. rules. BY SIG	e shall be subject to and bound der said rules and agree to hold & Visitors Bureau, the host far Presentation of a signed entry NING BELOW, I AGREE to be sees by date of postmark.	by the l harm cility, form
Please complete the W-9 the entered in an Open NSBA Challenge or Futurity Classification numbers of the IRS requires the PtHA® to observe taxpayer indentification numbers of the IRS requires the PtHA® to observe taxpayer indentification numbers of the IRS requires for whom we have an information return (1099-Misce for premium payback). If the corresponding premium payback, subsequent payme be subject to backup withholding pregulations. NSBA, Cash Challeng Futurity Payout checks will not be	Name of entity entity's name of Business name Business name One of the appoint one of the color of the co	Go to www. guidance related to the pur individual. An entry is required on line 2.) e/disregarded entity name, if dif ropriate box for federal tax clas e following seven boxes. sole proprietor	Request for T iffication Number irs.gov/FormW9 for instruction pose of Form W-9, see Purpos (For a sole proprietor or disregard ferent from above. Sification of the entity/individual who pration S corporation reporation, S = S corporation, P = For the entry space, enter the appropriagraded entity. A disregarded entity.	and Certifica ons and the latest int se of Form, below. ded entity, enter the owne hose name is entered on Partnership tate code (C, S, or P) for the	r's name on line	Exemptions (codes apply onlocertain entities, not individual see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account	arded ly to als;	
until the PtHA® 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.		and you are p this box if you Address (numb City, state, and List account no	d entered "P" as its tax classification, u have an ownership interest, check ions			ned		
The social security nu listed on the W-9 show that of the current ow or, in the case of multi owners, one of the cur owners listed on the R tration Certificate.	ild be ner iple rrent	Enter your TIN in the ap backup withholding. For resident alien, sole proyentities, it is your emple TIN, later. Note: If the account is in Number To Give the Repart II Certific Under penalties of perjight. The number shown of 2. I am not subject to be Service (IRS) that I am no longer subject to 3. I am a U.S. citizen or 4. The FATCA code(s) of Certification instruction because you have failed acquisition or abandonn	r individuals, this is general pricetor, or disregarded entity or identification number (for number than one name, see quester for guidelines on weation provided in the second provide	vided must match the name gi ly your social security number r, see the instructions for Part EIN). If you do not have a numb the instructions for line 1. See hose number to enter. Expayer identification number (c (a) I am exempt from backup Iding as a result of a failure to	(SSN). However, for a I, later. For other per, see How to get a e also What Name and or I am waiting for a nu withholding, or (b) I hareport all interest or dispersion of the ISS that you a sal estate transactions, to an individual retirem	or Employe mber to be is ve not been r vidends, or (c correct. are currently s item 2 does n ent arrangem	notified by the Internal Revenu) the IRS has notified me that ubject to backup withholding tot apply. For mortgage interest ent (IRA), and, generally, payme	t paid, ents

Sign Here

Signature of U.S. person

				CASH CHALLENG entered through the fu		LASSES		
Class # Class Name	✓ for NSBA	A v for Ex		xhibitor's Name*		Exh. ID#	NSBA#	Class Fee
	Dual Approve	d Futurity						
Amateur Name:		_ Date of	Birth:		_ Rela	tionship to C	Owner:	
Youth Name:		_ Date of	Birth:		_ Rela	tionship to C	Owner:	
Payment Information (all class fees are for 4 judges)	Postmarked by Oct. 1	Postmark after Oct		At Show				
Cash Challenge classes	\$100/class	\$150/class		\$250/class		\$		
OPEN Futurity Fee	\$100/class	100/class \$150/cl		\$250/class		\$		
OPEN Class Entry Fee	\$140/class	class \$160/class		\$180/class		\$		
OPEN NSBA Fee - add to class fee	\$50/class	\$50/class		\$50/class		\$		-
AMATEUR Class Entry Fee	\$130/class	\$150/class		\$170/class		\$		
AM Flat Fee: 1 Horse/1 Rider /AM (10 class maximum-does not include poin	\$1200/unit nt fees, equipment	\$1400/unit fee or NSBA fee)		\$1600/unit		\$		
YOUTH Class Entry Fee	\$110/class	\$130/cla	ass	\$150/class		\$		-
YA Flat Fee: 1 Horse/1 Rider /YA (10 class maximum-does not include poin	\$1000/unit nt fees, equipment	\$1200/u fee or NS		\$1400/unit		\$		
AM/YA NSBA Fee - add to class fee	\$10/class	\$10/clas	SS	\$10/class		\$		-
Trail/Obstacle/Fence Equip. Fee - per class	\$35/class	\$35/class		\$35/class		\$		
Office/Drug Test fee - once per equine	\$75/horse	\$75/hor	se	\$75/horse		\$7	5.00	
			TOTAL	AMOUNT DUE		\$		
Incomplete entric	es and entries re	eceived	withou	t payment will not	be a	ccepted.		
Make checks payable to PtHA. US Funds						•		
CheckVisaMasterCardDis				rd #://	/	EXP:_	CV	V#:
Name on Card:							Date:_	