2026 COLOR BREED CONGRESS®
ABRA ENTRY FORM

Office Use Only:

Pre-Entry & Stall Deadline - October 1, 2026

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_____ ABRA Member ID #: _____

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

*Owners and exhibitors must be current members of ABRA to compete at the Color Breed Congress®.

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

Please include a copy of Horse Registration papers, owners & exhibitors ABRA membership card, 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. (PtHA®) 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. (PtHA®), the Competition, 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 PtHA® 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 if entered in an Open NSBA or Cash Challenge Classes.

The IRS requires the PtHA® to obtain the correct taxpayer indentification number (TIN) for persons for whom we have to file an information return (1099-Miscellaneous for premium payback). 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 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.

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

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See ***Specific Instructions*** on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . _____

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) _____

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____

(Applies to accounts maintained outside the United States.)

5 Address (number, street, and apt. or suite no.). See instructions.

Requester's name and address (optional)

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. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

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
2. 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. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

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

ABRA CLASS ENTRIES and CASH CHALLENGE CLASSES

Cash for Color and Go for the Gold Classes must be entered through the futurity.

Class #	Class Name	✔ for NSBA Dual Approved	Exhibitor's Name*	Exh. ID#	NSBA #	Class Fee
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				
		☐				

Amateur Name: _____ Date of Birth: _____ Relationship to Owner: _____

Youth Name: _____ Date of Birth: _____ Relationship to Owner: _____

Payment Information

(all class fees are for 4 judges)

	Postmarked by Oct. 1	Postmarked after Oct. 1	At Show	
Cash Challenge classes	$100/class	$150/class	$250/class	$_____
OPEN Class Entry Fee	$145/class	$165/class	$185/class	$_____
OPEN NSBA Fee - add to class fee	$50/class	$50/class	$50/class	$_____
AMATEUR Class Entry Fee	$135/class	$155/class	$175/class	$_____
AM Flat Fee: 1 Horse/1 Rider /AM (10 class maximum-does not include point fees, equipment fee or NSBA fee)	$1250/unit	$1450/unit	$1650/unit	$_____
YOUTH Class Entry Fee	$115/class	$135/class	$155/class	$_____
YA Flat Fee: 1 Horse/1 Rider /YA (10 class maximum-does not include point fees, equipment fee or NSBA fee)	$1050/unit	$1250/unit	$1450/unit	$_____
AM/YA NSBA Fee - add to class fee	$10/class	$10/class	$10/class	$_____
Trail Equipment Fee - per class	$35/class	$35/class	$35/class	$_____
Office/Drug Test fee - once per equine	$75/horse	$75/horse	$75/horse	$ 75.00
ABRA National fee - once per equine	$8/horse	$8/horse	$8/horse	$ 8.00
			TOTAL AMOUNT DUE	$_____

Incomplete entries and entries received without payment will not be accepted.

Make checks payable to PtHA. US Funds ONLY. A 3% credit card transaction fee will be added.

___Check ___Visa ___MasterCard ___Discover ___American Express Card #:_____/_____/_____/_____ EXP:_____ CVV#:_____

Name on Card: _____ Signature:_____Date:_____