



**WCHA YELLOW ROSE
 “ALL BREED” HALTER FUTURITY
 NON PRO EXHIBITORS
 HELD IN CONJUNCTION WITH
 PINTO WORLD CHAMPIONSHIP SHOW
 June 20th, 2021 – Ford Truck Arena, Tulsa, OK- 7:30 a.m.**

HORSE’S NAME: _____ BREED: _____ BREED REG # _____

Copy Of Registration Papers MUST Be Sent With This Entry Form !!!

Birthdate Of This Entry Is: _____ Sire: _____ Dam: _____

OWNER: _____ WCHA MEMBER: YES or NO (fill out separate membership form)

ADDRESS: _____ CITY: _____ STATE: _____ ZIP : _____

Social Security or Tax Id #: _____ (mandatory)

EMAIL OF CONTACT PERSON: _____ CELL # : _____

EXHIBITOR: _____ AMATEUR OR YOUTH (Circle One)

Please Check Classes You Are Entering With This Horse:

_____ Non Pro Yearling Mares _____ Non Pro Yearling Geldings _____ Non Pro Yearling Stallions

_____ Non Pro Two Year Old Mares _____ Non Pro Two Year Old Geldings _____ Non Pro Two Year Old Stallions

Non Pro Class Fee:	If Entry Is Postmarked or Emailed By May 1 st	\$200.00
	If Entry is Postmarked or Emailed By June 1 st	\$225.00
	Late Entry If Paid By 5pm On June 19th	\$250.00
	Office/Arena Usage Fee =	\$ 50.00

Amount Sending With This Entry	Credit Card #: _____
Class Entry Fee: \$ _____	Expiration Date: _____ CVV Code: _____
Class Office Fee: \$ <u> 50.00 </u>	Name On Card: _____
	Billing Zip Code: _____ 3% Processing Fee

Rules:

- 1) WCHA Approved Event – Open To Horses Registered With APHA, ApHC, AQHA – Amateur/youth Exhibitors)
- 2) Monies Won by Non Pros Are Counted in WCHA’s *Race for the Trailer*.
- 3) No Substitutions, No Refunds.
- 4) Horses Must Be Sired by Stallions Enrolled in the WCHA Yellow Rose Futurity Program, any person can nominate a stallion into the program @ nomination fee of \$250, **Stallion Nominations Are Still Open !!**
- 5) Added Monies To Purse : Entry Fees Plus Stallion Nomination Fees less 10% office/award fee.

I _____ (Owner or Agent MUST sign) hereby release World Conformation Horse Association, Pinto Horse Association and their respective directors, officers, members, volunteers, employees and lessors of premises from all liability, claims, losses or damages arising from injury, death and/or property damages occurring as a result of participation in the activities, (and participant’s family, heirs, agents, representatives). Participant has read this document and other rules of the futurity program, fully understands the terms and by signing hereby agrees to be bound by all terms and conditions set forth.

Note: All horses must purchase a stall directly from Pinto World Show, use this link to download stall form:
<https://pinto.org/index.php/en/general-information/forms-and-schedule>

Send Entries To: WCHA – 230 Causey Road – Columbia, LA 71418
 Or Scan and Email To: touchdownkid95@gmail.com Questions: Don Falcon : 480-229-9767
 WCHA Staff Will Be In Attendance At The Pinto World So Late Entries Can Be Made Directly



WCHA Memberships
230 Causey Road
Email: touchdownkid95@gmail.com
www.conformationhorse.com

Membership Form

Name on Membership: _____
ADDRESS: _____
CITY: _____ STATE/ PROVIDENCE: _____ ZIP CODE: _____
DAY PHONE: _____ CELL: _____

EMAIL: _____ (Print Clearly)

Is This A : _____ 2021 NEW MEMBERSHIP OR _____ 2021 RENEWAL (Check One)

- _____ 1 YEAR REGULAR (Open Exhibitor – Ranch or Partnership) MEMBERSHIP - \$50.00
- _____ 1 YEAR NON-PRO (Amateur) MEMBERSHIP - \$40.00
- _____ 1 YEAR YOUTH (AGE 18 OR UNDER AS OF JANUARY 1ST) MEMBERSHIP - \$25.00
- _____ 1 YEAR JOINT MEMBERSHIP- \$75.00

“Free Annual Subscription To Equine Chronicle With Each Paid Membership”

To compete in WCHA sanctioned events the Owner and Exhibitor must be current WCHA members, however if horses are owned jointly by husband and wife both individuals can compete with a joint membership.
Founding Members are governed by original rules, owner and exhibitor must have separate memberships.

- _____ Lifetime Single or Ranch/Corporation/Partnership/Trust - \$500.00
- _____ Lifetime Joint - \$500 (This will comply with owner/exhibitor rules for Husband and Wife)

PAYMENT METHOD: _____ CASH _____ CHECK (ENCLOSED) _____ CREDIT CARD (BELOW)
NAME ON CREDIT CARD: _____
CREDIT CARD NUMBER: _____
EXP. DATE _____ CVV CODE: _____ BILLING ZIP CODE: _____
SIGNATURE: _____ DATE: _____

OFFICE USE ONLY: DATE RECEIVED _____ DATE PROCESSED: _____ CC CONFIRM # _____

NOTES:
APPLICATIONS MAY BE ACCEPTED OR DENIED WITHOUT RECOURSE OF ANY NATURE. MEMBERSHIP BEGINS THE DAY THE MEMBERSHIP FORM AND PAYMENT ARE RECEIVED BY THE WCHA OFFICE OR BY A WCHA EVENT SHOW OFFICE REPRESENTING THE WCHA AND EXPIRES DECEMBER 31 OF THE CALENDAR YEAR OF PURCHASE.