

**2024 Pinto World Championship®**  
**OPEN ENTRY FORM**  
ONE FORM PER PINTO

Office Use Only:

Pinto Name \_\_\_\_\_ PtHA Registration # \_\_\_\_\_

Year Foaled \_\_\_\_\_ Sex  Mare  Gelding  Stallion NSBA Registration # \_\_\_\_\_

Owner Name on Registration certificate: \_\_\_\_\_

Is the owner a current PtHA® member?  Yes  No\* PtHA ID #: \_\_\_\_\_ \*\*NSBA ID#: \_\_\_\_\_

\*Owners and exhibitors must be current members of PtHA® to compete at the World Show. (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 owners & exhibitors NSBA card with your entry form.**

Owner's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Exhibitor Information:**

Is exhibitor an active member or veteran of the Armed Services?  Yes  No

Exhibitor Name \_\_\_\_\_

Is the exhibitor a current PtHA® member?  Yes  No\* PtHA® ID #: \_\_\_\_\_ \*\*NSBA ID#: \_\_\_\_\_

\*Owners and exhibitors must be current members of PtHA® to compete at the World Show. (for dual approved classes only)

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

Exhibitor's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Exhibitor Information:**

Is exhibitor an active member or veteran of the Armed Services?  Yes  No

Exhibitor Name \_\_\_\_\_

Is the exhibitor a current PtHA® member?  Yes  No\* PtHA® ID #: \_\_\_\_\_ \*\*NSBA ID#: \_\_\_\_\_

\*Owners and exhibitors must be current members of PtHA® to compete at the World Show. (for dual approved classes only)

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

Exhibitor's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

# of OPEN Classes \_\_\_\_\_ x \$ \_\_\_\_\_

# of NSBA Classes \_\_\_\_\_ at \$50 NSBA fee \_\_\_\_\_

# of Equipment Fees \_\_\_\_\_ at \$25 \_\_\_\_\_

Office Fee - once per Pinto \_\_\_\_\_ \$50 \_\_\_\_\_

Drug Test Fee - once per Pinto \_\_\_\_\_ \$20 \_\_\_\_\_

Pinto Heritage Foundation Inc. – 501(c)(3) \_\_\_\_\_

Donate \$2, \$10, \$25... etc. \_\_\_\_\_

Total Amount Due \_\_\_\_\_

Mail, fax or email form to:  
PtHA®, World Show Entries  
7330 NW 23rd Street • Bethany, OK 73008  
Phone: 405-491-0111 Fax: 405-787-0773  
email: worldshow@pinto.org

**Do not duplicate entries**  
**Pre-Entry Deadline - April 25, 2024**

*At Show Entries must be made by 6:00 pm the day prior to the class.*

**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: \_\_\_\_\_

**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. I fully understand that the activities include, but are not limited to, "inherent risks of equine activities" that may result in property damage and bodily injury, including, but not limited to, permanent disability, paralysis, and death (collectively "risks"); that such risks may be caused by Participant's own action or inaction, the action or inaction of others participating in the Activities, the condition of the premises at which the Activities take place, and/or the negligence of the "releases" named below. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.

I 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: \_\_\_\_\_

April 2024

Horse Name: \_\_\_\_\_

Class #	Open Class Name	✓ for NSBA	✓ for Equipment	Exhibitor's Name	Exhibitor's PtHA # / NSBA #	Class Fee
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

**PRE-ENTRY FEES**

Pre-Entry Deadline: Entries must be postmarked on or before April 25, 2024.

Open classes	\$155
Open NSBA class fee (in addition to Open class fee)	\$50
Charity Walk/Trot class	\$50

**POST-ENTRY FEES**

Post-Entry: Entries postmarked after April 25, 2024, until 6 pm the day before the class you wish to enter.

Open classes	\$205
Open NSBA class fee (in addition to Open class fee)	\$50
Charity Walk/Trot class	\$100

**Schooling/Equipment Fee**

**PER CLASS IN ADDITION TO CLASS FEE**

Per Dressage/Western Dressage Class	\$25
Per Hunter Over Fences In Hand Class	\$25
Per Jumping In Hand Class	\$25
Per Over Fences Class	\$25
Per Trail In Hand Class	\$25
Per Trail/Ranch Trail Class	\$25
Per Obstacle Driving Class	\$25

**Please complete the W-9 form**

The IRS requires PtHA 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. 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 or high point award. 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**  
(Rev. October 2019)  
Department of the Treasury  
Internal Revenue Service

**Request for Taxpayer Identification Number and Certification**

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the requestor. Do not send to the IRS.**

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Print or type. See specific instructions on page 3.

**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. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC

Corporation

S Corporation

Partnership

Trust/estate

Limited liability company (check the classification:  Disregarded entity,  S corporation,  Partnership) ►

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ►

**4** Exemptions (codes apply only to certain entities, see instructions on page 3):

Exempt payor code (if any) \_\_\_\_\_

FATCA exemption code (if any) \_\_\_\_\_

(Apply to accounts maintained outside the U.S.)

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

Requestor's name and address (optional)

**6** City, state, and ZIP code

**7** List account number(s) (not optional)

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**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. Also see *What Name and Number To Give the Requestor* for guidelines on whose number to enter.

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.

**Social security number**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**OR**

**Employer identification number**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

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**Part II Certification**

Under penalties of perjury, I certify that:

- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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. If or real estate transactions, item 2 does not apply. If or 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.

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**Sign Here**

Signature of U.S. person ►

Date ►