



\$20,000 ADDED FREESTYLE ENTRY FORM

Wednesday November 29, 2017

ENTRIES MUST BE IN THE NRHA OFFICE ON OR BEFORE NOVEMBER 7TH.

Horse's Name: _____ NRHA License #: _____

Owner: _____ NRHA ID #: _____

Co Owner: _____ NRHA ID #: _____

Rider: _____ NRHA ID #: _____

Rider's Cell Phone #: _____

Entry Fee: \$100

Video Fee: \$20

Meds Fee: \$7

Total Due: \$127

Monies must be paid in US funds by check, money order or credit card. Credit card payments are subject to a 3.5% service charge.

American Express Discover

Card# _____ - _____ - _____

MasterCard Visa

Exp Date ____/____/____ Security Code _____

Name on card: _____

I, _____, (participant) in consideration of my participation in the equine event known as the 2013 NRHA Futurity & North American Affiliate Championship show held November 23 - December 2, 2017 hereby grant to the NRHA, the right to record, broadcast and otherwise exploit, in any & all media throughout the world, my performance in the event, & to use my & my horse's name, likeness, voice & biographical information in connection therewith.

I understand & am aware of the inherent risks associated w/ equine activities. I assume all risks associated with my participation in the event & hereby release & hold harmless the NRHA, sponsors, suppliers for the event, their respective directors, officers, employees, agents, successors & assigns from & against any & all claims, damages, liabilities, costs & expenses including reasonable attorney's fees arising out of my participation in the event, including without limitation, any personal injuries or damage to my property which I may incur as a result of performing in a reining horse class.

The show management reserves the right to interpret these rules and regulations. All decisions are final. I have read & understand the terms & conditions of the entry into this event & agree to abide by those terms & conditions & the NRHA rules & regulations. I have the authority & hereby do, by making this entry, assume responsibility for & bind owner, rider &/or agent to the terms & conditions of this Release & Waiver of Liability. I warrant that I am of legal age and that I have read & fully understand the foregoing terms.

(Signature)

(Printed Name)

(NRHA ID #)

(Phone)

(Date)

I, _____, represent & warrant that I am the parent or legal guardian of the rider named above, that I am of legal age & that I have read & fully understand the foregoing release & agree for participant's heirs, successors & assigns, & for participant's legal representatives to be bound by the terms thereof.

(Signature)

(Printed Name)

(NRHA ID #)

Make all checks payable to National Reining Horse Association (in US funds)

NRHA is not responsible for late or lost mail

Mail entries and payment in full to: NRHA – Entries, 3021 W Reno Avenue, Oklahoma City, OK 73107-5302.

If paying by credit card, entry can be faxed to 405-946-8425.



Freestyle Exhibitor Information

Nov 23rd - Dec 2nd, 2017 • Oklahoma State Fairgrounds • Oklahoma City, Oklahoma

Name: _____

Horse: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax: _____

Introduction: (If you plan to use one, write in below or attach a copy to this form)

Music Selection: _____

When/Where should your music begin: Entrance Gate 1st Cone Center of Arena Other

Lighting Requests: _____

Additional Requests or Information:

Freestyle Rehearsal - Wednesday November 29th - Check Warm Up Schedule for Details