

2026 NRHA FUTURITY FORM 1st Payment is Due January 15, 2026

For office use only:	

— AFFLATE CHAMPONEMPS —	•		•	·	
Horse's Name:			License #:		
Breed & Reg. #: _			Sex:	Year Foaled:	
Sire:			_ Dam:		
				NRHA ID #:	
Address:			City, State, Zip:		
Phone: ()		Email:			
	Phone: ()				
Entry nor individual pa	nyment is not considered entry form and payment i	as completed by		WAIVER OF LIABILITY	
# of Payment	Due Date	Amount	l,	onsideration of my participation in the equine event known	
1st Payment	January 15, 2026	\$555	äs the NRHA Fu	turity and Championship Show herby grant to the NRHA,	
2nd Payment	April 1, 2026	\$600	throughout the w	d, broadcast and otherwise exploit, in any and all media orld, my performance in the event and to use my and my	
3rd Payment	June 1, 2026	\$720	horse's name, lik therewith. I unde	keness, voice and biographical information in connection erstand and am aware of the inherent risks associated with	
4th Payment	August 1, 2026	\$675	equine activities.	I assume all risks associated with my participation in the y release and hold harmless the National Reining Horse	
5th Payment	October 1, 2026	\$740	Association, and	sponsors and suppliers for the event, their respective s, employees, agents, successors and assigns, from	
5th payment mus	ts must be postmarked to be received by the tions for Appropriate Late	due date.	event, including property which n By my signature are no refunds o the terms and co	able attorney's fees arising out of my participation in the without limitation, any personal injuries or damage to my nay incur as a result of performing in a reining horse class, I acknowledge that once a payment is remitted, there r substitutions for this event. I have read and understand and the entry into this event and agree to abide by	
Sire 8	& Dam Payment Sch	edule		conditions and the NRHA Rules and Regulations. I have I hereby do, by making this entry, assume responsibility	
Payment	Due Date	Amount	for and bind own	er, rid ánd/or agent to the terms and conditions of this iver of Liability. I warrant that I am of legal age and that I	
1st	July 1, 2026	\$875		illy understand the foregoing terms.	
2nd	October 1, 2026	\$740	Parent or Guard	dian's Guarantee	
Copy of Competit	th payment (check o ion License or Breed ers must be included	1	ipant named abo	arrant that I am the parent or legal guardian of the partic- ove, that I am of legal age and that I have read and fully	
Use this card for	ONE Time Payment ALL remaining Futu	rity Payments	sors and assigns by the terms the	oregoing release and agree for participant's heirs, succes s, and for participant's legal representatives to the bound ereof. s, please send a request via email to promlesa1@gmail.com.	
Name on Credit Car	⁻ d			Phone #	
Billing Address					
City, State				Zip	
Same as Above	Visa	Master Card	Amex	Discover	
Credit Card Number	r:			Exp. Date:	
				t card.) Total Payment Amount \$	
	•			Date:	

Current or 2025 NRHA membership for both owner (as listed on competition license) and rider is required.