



2020 August Pre-Futurity & Derby - Aged Event Entry Form

Will Rogers Memorial Center & John Justin Arena, Fort Worth, Texas

August 10-16, 2020

Futurity, Derby, 2 Full NRCHA/AQHA Shows (Last year's payout over \$201,000)

A COPY OF THE REGISTRATION PAPERS, OWNER / RIDER NRCHA MEMBERSHIP CARDS MUST BE INCLUDED WITH THIS ENTRY

Send to SRCHA c/o Gay Lenz - 11587 Hunt Lane, Guthrie, OK 73044 Phone (405) 818-7556, Fax (405) 730-8050 email: entry@srcha.org

Make Checks Payable to: SRCHA Credit Cards Accepted (5% Charge)

Mark Here	Deadline July 27th		Subject to Late fee 25% of Total Entry	Estimated Added Money	Add Back JP	Entry fee	Cattle /Video	NRCHA Fee	Total	Total Due
	Class	Notes								
	OF	Open Futurity	Auto entry if eligible, IOF/LOF	\$50,000	\$850	\$550	\$250	\$8	\$1,658	
	IOF	Intermediate Open Futurity (enter if eligible)								
	LOF	Limited Open Futurity (enter if eligible)								
	L1LOF	Level One Limited Open Futurity								
	OD	Open Derby	Auto entry if eligible, IOD/LOD	Jackpot				\$8	\$583	
	IOD	Intermediate Derby (enter if eligible)								
	LOD	Limited Open Derby (enter if eligible)								
	NHD	\$5000 Novice Horse Derby								
	L1LO	Level One Limited Open Derby	Do not have to enter the OD	Jackpot	\$100	\$50	\$250	\$8	\$408	
	NPF	Non Pro Futurity	Auto entry if eligible, INPF/LNPF	\$2,500	\$300	\$100	\$250	\$8	\$658	
	INPF	Intermediate Non Pro Futurity (enter if eligible)								
	LNPF	Novice Non Pro Futurity (enter if eligible)								
	AMTF	Amateur Futurity								
	NPLFB	Non Pro Limited Futurity (Boxing)	Do not have to enter NPF	\$450	\$125	\$75	\$250	\$8	\$458	
	NPD	Non Pro Derby	Auto entry if eligible, INPD/NNPD	Jackpot	\$125	\$75	\$250	\$8	\$458	
	INPD	Intermediate Non Pro Derby (enter if eligible)								
	NNPD	Novice Non Pro Derby (enter if eligible)								
	AD	Amateur Derby								
	NPLD	Non Pro Limited Derby (Boxing)	Do not have to enter the NPD	Jackpot	\$100	\$50	\$250	\$8	\$408	
	OBS	Open Bridle Spec	Must enter OB	\$750	\$500	\$100	\$200	\$8	\$808	
	OTRS	Open Two Rein Spec	Must Enter OTR	\$400	\$250	\$75	\$200	\$8	\$533	
	NPBS	NP Bridle Spec	Must Enter one of the NP Classes	\$300	\$150	\$75	\$200	\$8	\$433	
	NPLS	NP Limited Boxing Spec	Must enter one of the NPL Classes	\$300	\$150	\$75	\$200	\$8	\$433	

By my signature below, I hereby acknowledge that I meet the criteria for eligibility to the classes entered according to the guidelines set forth in the NRCHA rulebook. I understand the risks involved in riding horses and/or cow work and voluntarily assume those risks. I also acknowledge that UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. I agree that I will not hold NRCHA, SRCHA, or any of the directors, officers, employees, volunteers, clients, or participants liable for any injury or property damage risking out of or caused by this horse show. I have read this release and understand its terms and agree that I am a SRCHA member.

	# Grounds x \$30/per day
	# Stalls x \$180/\$225 if Late
Use stall form for multiple stalls & Shavings	
Use Practice Sign Up form	
for all Practices (Herd/Fence/Rein)	
Total	

TEXAS BRED INCENTIVE \$50,000
 (\$40,000 to Open/\$10,000 to Non Pro)
 Highest placing Futurity Horses. Must be TQHA Member and horses must have been foaled in Texas to be eligible

Date _____
 Signature (Exhibitor/Agent/Owner/parent or Guardian) MUST SIGN _____

STALLS - Stalls are first come first serve basis
 RV - Reserve upon arrival

Owner/Rider must be a current member of NRCHA/SRCHA

NOTE: Cross-entering. When cross entering pay only 1 cattle fee, 1 Video fee

PAYEE ___Owner ___Rider SS# _____

Horses's Name _____ AQHA# _____ OTHER# _____ Year Foal _____

Sire _____ Dam _____ Stallion _____ Mare _____ Gelding _____

Owner's Name _____ (phone#) _____ NRCHA # _____

Address _____ City _____ State _____ Zip _____

Rider's Name _____ NRCHA # _____ AQHA # _____ Expiration _____

(phone#) _____ DOB _____

Address _____ City _____ State _____ Zip _____

Payment ___Check ___Cash ___Credit Card (5% applied) email _____

CC# _____ EXP _____ CVS _____ Billing Zip _____

Hold for check

_____ Date _____ Signature _____

6/23/2020