

Horse Show Office  
P O Box 20070  
Houston, TX 77225

# HOUSTON LIVESTOCK SHOW and RODEO™

## AQHA CUTTING ENTRY FORM

832-667-1012 phone  
832-667-1140 fax  
[horseshow@rodeohouston.com](mailto:horseshow@rodeohouston.com)

Three NRG Park  
Houston, TX 77054

Enter online at  
[www.rodeohouston.com](http://www.rodeohouston.com)

Entry Deadline: must be postmarked by February 1, 2018  
Late Entry Deadline: must be received by February 10, 2018

### 1. OWNER (person listed on horse registration papers – list ONE NAME ONLY)

Name \_\_\_\_\_ Social Sec # (last 4 digits) \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # ( ) \_\_\_\_\_ Signature \_\_\_\_\_

### 2. HORSE (one horse per entry form)

Name \_\_\_\_\_ Registration # \_\_\_\_\_  
(as listed on registration papers)  
Sex \_\_\_\_\_ Color \_\_\_\_\_ Year Foaled \_\_\_\_\_

### 3. EXHIBITOR

**A** Name \_\_\_\_\_ Relation to Owner \_\_\_\_\_  
Address \_\_\_\_\_ AQHA # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Birthdate \_\_\_\_\_  
Phone # ( ) \_\_\_\_\_ Signature \_\_\_\_\_  
(Required for youth exhibitors)

**B** Name \_\_\_\_\_ Relation to Owner \_\_\_\_\_  
Address \_\_\_\_\_ AQHA# \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Birthdate \_\_\_\_\_  
Phone # ( ) \_\_\_\_\_ Signature \_\_\_\_\_  
(Required for youth exhibitors)

#### \*\*\*REMEMBER TO INCLUDE\*\*\*

- Completed entry form & fees
- Copy of horse registration papers showing current owner
- Completed W-9 form for Owner
- Copy of current AQHA/AQHA amateur or AQHYA card for all exhibitors

### 4. CORRESPONDENCE

Send Correspondence to:  Owner  Payor  
(Payor is defined as the person/organization named on the check or credit card)

Payor Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_

### 5. TRAINER

Name \_\_\_\_\_

## 6. CLASS ENTRY (if more than one exhibitor, indicate exhibitor A or B)

| Class      | Exhibitor | Entry Fee | Cattle Charge | Office Fee |
|------------|-----------|-----------|---------------|------------|
| 1. Junior  | _____     | \$110     | \$150         | \$50       |
| 2. Senior  | _____     | \$110     | \$150         | \$50       |
| 3. Amateur | _____     | \$110     | \$150         | \$50       |
| 4. Youth   | _____     | \$10      | \$150         | \$50       |

As valid consideration for entry into and participation in activities (the "Activities") with the Houston Livestock Show and Rodeo, Inc., Houston Livestock Show and Rodeo Educational Fund, HLS&R Institute for Teacher Excellence, Houston Livestock Show and Rodeo Endowment Foundation and the Corral Club, Inc., (collectively, "HLSR"), the undersigned hereby enters into this RELEASE OF LIABILITY AND INDEMNITY AGREEMENT (this "Agreement").

1. **ACKNOWLEDGMENT OF RISKS:** The undersigned recognizes and understands there are risks associated with entry into and participation in the Activities including, but not limited to, bodily injury or death, and damage to property or privacy rights. The undersigned further acknowledges that he/she will be liable for all damage to persons, livestock, or property that is caused by him/her or any persons (including, but not limited to, minors) under their care and control, and that arise out of, or are related to, the undersigned's entry into and participation in the Activities. **UNDER CHAPTER 87, TEXAS CIVIL PRACTICE AND REMEDIES CODE, A FARM ANIMAL PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN FARM ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL ACTIVITIES. A LIVESTOCK SHOW SPONSOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN A LIVESTOCK SHOW RESULTING FROM THE INHERENT RISKS OF LIVESTOCK SHOW ACTIVITIES.**

2. **RELEASE FROM LIABILITY:** The undersigned hereby RELEASES, ACQUITS AND FOREVER DISCHARGES and shall DEFEND, INDEMNIFY AND HOLD HARMLESS HLSR, their present and former directors, officers, employees, agents, and representatives and the respective heirs, administrators, executors, successors and assigns (collectively, the "HLSR Parties" or individually, an "HLSR Party") from any and all claims, causes of action, suits and/or demands for personal injury, death or property damage, accrued or to accrue in the future, known or unknown, (collectively, "Claims") relating to or arising out of any negligent, grossly negligent and/or intentional or unintentional acts on the part of the undersigned in connection with his/her entry into and participation in the Activities. Without limiting the foregoing, the undersigned agrees that the HLSR Parties shall not be liable to him/her, his/her family, heirs, administrators, executors or assigns for Claims arising from or related to the undersigned's entry into and participation in the Activities.

3. **AGREEMENT TO INDEMNIFY AND HOLD HARMLESS:** The undersigned hereby RELEASES, ACQUITS and FOREVER DISCHARGES and agrees to DEFEND, INDEMNIFY and HOLD HARMLESS THE HLSR PARTIES AGAINST THE CONSEQUENCES OF THE HLSR PARTIES' OWN NEGLIGENCE, REGARDLESS OF WHETHER SUCH NEGLIGENCE WAS THE SOLE, PROXIMATE OR PRODUCING CAUSE OF THE CLAIMS; provided, however, that the duty of the undersigned to defend, indemnify and hold harmless the HLSR Parties shall extend only to Claims arising directly or indirectly from the undersigned's entry into and participation in the Activities. As used herein, "INDEMNIFY" means to agree to assume the HLSR Parties' liability in a situation, thereby relieving them of responsibility and/or reimbursing the HLSR Parties for Claims asserted against them.

4. **PHOTOGRAPH/INTERVIEW RELEASE AND INDEMNITY:** The undersigned GRANTS PERMISSION to be PHOTOGRAPHED and/or INTERVIEWED in connection with the Activities. The undersigned understand that photographs and/or interviews may be used by HLSR Parties and/or television, film, video, visual, or printed media. The undersigned agrees to RELEASE and INDEMNIFY HLSR Parties for any Claims related to photographs and/or interviews by the HLSR Parties or any media.

The undersigned represents that he/she thoroughly understands that this is a complete and final release and indemnity agreement, that he/she is voluntarily entering into this Agreement, and that no representations, promises or statements made by any HLSR Party, or any agent, attorney or other representative of any HLSR Party has influenced the undersigned in causing him/her to sign this Agreement.

The undersigned understands that this Agreement shall be binding on his/her heirs, executors, successors and assigns, that the Agreement will be governed by the laws of Texas, and that jurisdiction and venue for any dispute regarding this Agreement shall lie in a State Court in Harris County, Texas. If any part of this Agreement is determined to be unenforceable, it does not affect the validity of the remainder of this Agreement. This Agreement controls notwithstanding any conflicting terms or conditions of any other agreement between the parties. The undersigned agrees to these terms and conditions and acknowledges receipt of this Agreement.

## 7. FEE SUMMARY

**\*\*\*If horse is being entered in both AQHA and NCHA cutting events, pay only the NCHA stall, tack and/or turnback stall fees\*\*\***

|   |           |
|---|-----------|
| Total Fees from #6 Above  | \$        |
| Late Entry Fee<br><small>(Double class fee for entries postmarked after 2/1/18)</small> | \$        |
| Stall (mandatory) _____ x \$60 =  | \$        |
| Tack Stall _____ x \$60 =   | \$        |
| Turnback Horse Stall _____ x \$60 =   | \$        |
| AQHA Processing/Drug Test Fee   | \$18      |
| <b>TOTAL DUE</b>  | <b>\$</b> |

## 8. PAYMENT INFORMATION

Cash       Check       Credit Card  
(Check # \_\_\_\_\_)

Circle One: Visa    Mastercard    Am Ex

Authorized Signature \_\_\_\_\_

Name on Card \_\_\_\_\_

Expiration \_\_\_\_\_

Card # \_\_\_\_\_

**PLEASE MARK ALL SHOW(S) ENTERED**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> All Brd Roping/Speed | <input type="checkbox"/> Donkey/Mule         | <input type="checkbox"/> NCHA                  |
| <input type="checkbox"/> Paint Horse          | <input type="checkbox"/> Ranch Rodeo         | <input type="checkbox"/> Quarter Horse Cutting |
| <input type="checkbox"/> Quarter Horse Roping | <input type="checkbox"/> Quarter Horse Speed | <input type="checkbox"/> Youth Horse Show      |

**Form W-9**  
(Rev. January 2005)  
Department of the Treasury  
Internal Revenue Service

**Request for Taxpayer  
Identification Number and Certification**

**Give form to the  
requester. Do not  
send to the IRS.**

|   |   |  |  |
|---|---|--|--|
| Print or type<br>See Specific Instructions on page 2. | Name (as shown on your income tax return)   |  |  |
|   | Business name, if different from above  |  |  |
|   | Check appropriate box: <input type="checkbox"/> Individual/<br>Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶ ..... | <input type="checkbox"/> Exempt from backup<br>withholding |  |
|   | Address (number, street, and apt. or suite no.)   | Requester's name and address (optional)                    |  |
|   | City, state, and ZIP code   |  |  |
| List account number(s) here (optional)                |   |  |  |

**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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

|                        |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|
| Social security number |  |  |  |  |  |  |  |  |
|                        |  |  |  |  |  |  |  |  |

or

|                                |  |  |  |  |  |  |  |  |
|--------------------------------|--|--|--|--|--|--|--|--|
| Employer identification number |  |  |  |  |  |  |  |  |
|                                |  |  |  |  |  |  |  |  |

*Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.*

**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. person (including a U.S. resident alien).

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. For real estate transactions, item 2 does not apply. For 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 on page 4.)

|                  |                            |        |
|------------------|----------------------------|--------|
| <b>Sign Here</b> | Signature of U.S. person ▶ | Date ▶ |
|                  |                            |        |