

PAYMENT:

Check Enclosed

Credit Card Authorization Form Enclosed



## April 15-26, 2025 Built Ford Tough Livestock Complex at Expo Square Tulsa, OK DUE MARCH 15, 2025

For Office Use: Entry #\_\_

Horse Name:			Co	mp Lic #:			
Sire:		Dam:					
AQHA#A	PHA #:						
Owner Name:			SSN #:				
Address:			Required	d to receive checks  New address?	Yes		No
City:							110
Phone (Home):							
Email:							
NRHA #:	AQHA#:APHA#:APHA#:						
Rider Name:							
Relationship to Owner:	NRHA #:	AQHA	#:	APHA#	ł:		
Address:						ble ∕es	No
City:							
Phone (Home):							
E-mail:							
# in Party: Where you are staying:			L	ength of Stay:			
Added Class Vame	Pattern Entry Fee Fee	Added Class	✓ Class Name		Pattern	Entry Fee	Judges Fee
THURSDAY, APRIL 24				AY, APRIL 25			•
\$100	\$10 - \$10 -	\$100   276   \$100   279	Youth 13 & u Youth 14 - 18	nder [2] 3 [2]	1	\$10 \$10	+ -
Jackpot 182 Unrestricted Youth [1]	6 \$10 -	Jackpot 282	Unrestricted `	Youth [2]	8	\$10	<u> </u>
- 185 AQHA Youth 18 & Under [1] - 186 APHA Youth 18 & Under [1]	\$15 -	- 285		18 & Under [2] 18 & Under [2]	. !	\$15	<del>  -</del>
- 186 APHA Youth 18 & Under [1]  Jackpot 187 10 & Under Short Stirrup [1]	\$15 - A \$10 -	- 286 Jackpot 287		Short Stirrup [2]	l B	\$15 \$10	+ -
TOTAL CLASS FEES:  Late Fee: (\$25 3/16 - Noon the Day Prior)		NRHA & AQHA, mem only the highest judge have credit card info i is not in the office with	bership cards MU- es fee and one vide included to hold en hin 7 days the late	ompetition license, API ST accompany entry foo oo monitor fee. Faxed t try; check must be ma fee will be applied. En: ATE FEE will be chan	orm. If cro entries ar iled imme try fees n	oss ente re requir ediately. nust be i	ering pay red to : If check PAID IN
Judges Fee:		by MARCH 15. Howe	ever, classes may b	be added at show with	no penal	ty. No ei	entries wil
Video Monitor Fee (x \$15/run):	\$15	be accepted after NOON the day prior to the show. The show management reserves the right to interpret these rules and regulations. All decisions will be final. By way of making an entry, the exhibitor is assuming responsibility for knowledge of the rules and releases show management from any claims or losses. The show management reserves the right					
AQHA Drug Fee ( x \$10/AQHA-judge):		to modify or change c signature, I agree to fo	conditions for the N	lational Reining Breede	ers Class	ic Show	ı. By my
APHA Fee ( X \$1/APHA-judge per class):							
NRHA Drug Fee (\$35/horse):	\$35	Signature of person ma	aking entry				Date
TOTAL DUE: Stall Form MUST be included! No outside sha	vings! All horses	Print name of person n	naking entry				



## **Request for Taxpayer Identification Number and Certification**

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	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				
Print or type. See Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check following seven boxes.  ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership single-member LLC  ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnersh Note: Check the appropriate box in the line above for the tax classification of the single-member own LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the ow another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single 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, not individuals; see instructions on page 3):  Exempt payee code (if any)  Exemption from FATCA reporting code (if any)  (Applies to accounts maintained outside the U.S.)			
ě	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name a	nd address (optional)		
96	7 Addison (Maniport, Ottoor, data dipt. of oddie no.) coo mod dollorio.	ioquotoi o namo a	na adal coo (optional)		
ď	6 City, state, and ZIP code				
	7 List account number(s) here (optional)				
Pai	rt I Taxpayer Identification Number (TIN)				
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	d Social sec	urity number		
reside	up withholding. For individuals, this is generally your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>		]-[]-		
TIN, I	ater.	or			
	: If the account is in more than one name, see the instructions for line 1. Also see What Name an	Employer	identification number		
Numi	ber To Give the Requester for guidelines on whose number to enter.	-	-		
Par	rt II Certification				
Unde	er penalties of perjury, I certify that:				
2. I ai Se	e number shown on this form is my correct taxpayer identification number (or I am waiting for a month subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or longer subject to backup withholding; and	have not been no	otified by the Internal Revenue		
3. I ai	m a U.S. citizen or other U.S. person (defined below); and				

- 4. 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. 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, paym

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.					
Sign Here	Signature of U.S. person ►	Date ►			

## General Instructions

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- . Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,