



2025 NCHA FUTURITY - AMATEUR ENTRY FORM

MUST BE POSTMARKED BY DUE DATE – Late Fees Apply After Due Date

Mailing Address: 260 Bailey Ave Fort Worth, TX 76107

Phone: 817-244-6188 | Fax: 817-244-2015 | Email: entries@nchacutting.com

For Foals of 2022

For the full list of terms & conditions, payment schedule & penalties please visit: <https://www.nchacutting.com/events/futurity>

Please Submit 1 Entry Form Per RIDER. Entries not accepted without payment. All Late payments are assessed a penalty.

1. 1ST PAYMENT POSTMARK DATE AUG 15, 2025
2. 2ND PAYMENT POSTMARK DATE OCT 1, 2025

CLASS	ENTRY FEE	SENIOR	GELDING	CHROME CASH
AMATEUR LTE: \$100,000 or more	1. ___\$800 2. ___\$1,570* Total with Two Payments: \$2,370*	___\$600	___\$600	___\$600
INTERMEDIATE AMATEUR LTE: \$25,001- \$99,999	1. ___\$700 2. ___\$1,465* Total with Two Payments: \$2,165*	___\$600	___\$600	___\$600
LIMITED AMATEUR LTE Cap: \$25,000	1. ___\$650 2. ___\$1,315* Total with Two Payments: \$1,965*	___\$600	___\$600	___\$600
COMBO ENTRY: AMATEUR + INT. AM + LTD AM	1. ___\$2,150 2. ___\$2,460* Total with Two Payments: \$4,610*	Combination entries ride to the herd one time, score counts for each level entered. Office fee applied only once to combination entries. ** See Rules for information on Combo Slot Sales		
COMBO ENTRY: AMATEUR + INT. AMATEUR	1. ___\$1,500 2. ___\$2,090* Total with Two Payments: \$3,590*			
COMBO ENTRY: AMATEUR + LTD AMATEUR	1. ___\$1,450 2. ___\$1,940* Total with Two Payments: \$3,390*			
COMBO ENTRY: INT. AMATEUR + LTD. AMATEUR	1. ___\$1,350 2. ___\$1,835* Total with Two Payments: \$3,185*			

*\$20 PAC Fee included: Under Texas Election Code, Chapter 253, the Political Action Committee (PAC) fee is a voluntary contribution. Funding the PAC is important to be able to maintain state funding at the NCHA Triple Crown events. Your contribution will provide critical assistance to the NCHA with this effort. To opt out of the PAC fee, submit your payment without the amount indicated as the PAC fee for your class.

Rider #: _____ Rider Name: _____

Best Contact Phone: _____ Email: _____

For Named Entries (entries made with both rider name AND horse name)

Horse Name: _____ Horse Registration #: _____

Owner #: _____ Owner Name: _____

Correspondent (if different from rider): _____

Address: _____

City / State / Zip: _____

Best Contact Phone: _____ Email: _____

Photocopy of front and back of registration certificate or colored application for unregistered horses due in office by August 15, 2025.

RELEASE FROM LIABILITY AND WAIVER OF RESPONSIBILITY: As a condition to participate in this event, the NCHA, the directors, officers, employees, members, agents and representatives are hereby released from all claims, demands, or causes of action of any kind or nature whatsoever; whether now existing or to hereafter accrue, on account of any damage, cost or expense (i) As a result of any bodily injury, loss or damage to any animals, equipment or other personal property, from any cause whatsoever including, but not limited to, the sole or concurrent negligence of NCHA, its directors, officers, employees, agents or representatives; or (ii) as a result of the interpretation or enforcement of the NCHA constitution, bylaws, rules or regulations and the risk of any such damage, cost or expense which may occur by reason of forgoing is hereby assumed and accepted. This waiver is binding on the undersigned as well as all riders, grooms and other helpers associated with the participation of the horse (s) described herein in this event and the undersigned indemnifies the NCHA from all claims, demands, or causes of action based on any of the foregoing. Both owner and rider of any horse entered in an NCHA produced event, by said entry, consents to the implementation of any action allowed by Standing Rule 35.a, Zero Tolerance by either show management or judge and Standing Rule 35A Medication Policy.

Pay With Check (Enclosed) Pay With Credit Card
(MC / Visa / AmEx / Discover)
 Card Number: _____
 Name on Card: _____
 Billing Street Address: _____
 Billing Zip Code: _____ Exp Date: _____ CVV: _____

* ALL payments received by NCHA are assessed a Non-Refundable Transaction Fee of 3%. NCHA will waive the fee if payment is submitted by check, Wire Transfer or ACH/E-check.

I agree to all rules, terms and conditions included in the Show Rules published on nchacutting.com

Make Checks Payable to: Owner Rider Other Name: _____ (W-9 Required for all payees)

Signature: _____ Parent / Legal Guardian: _____

If contestant is under 21 years of age both contestant and parent or legal guardian must sign this form

Print Name: _____

