

Print Name: _

2025 NCHA SUPER STAKES - 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

Foaled in 2019, 2020, 2021

For the full list of eligibility, conditions & payment schedule please visit, https://www.nchacutting.com/events/superstakes

1. 1 ST PAYMENT POSTMARK DATE JAN 15, 2025 2.				2 nd PAYMENT POSTMARK DATE FEB 14, 2025				
CLASS	ENTRY FEE		DUE: PRIOR TO START OF GO 1			TOTAL		
			Senior	Gelding	Chrome Cash	10K Novice	TOTAL	
AMATEUR	1\$650 2\$1,	,225*	\$600	\$600	\$600	\$600		
LTE: \$100,000 or more	Total with Two Payment	ts: \$1,875	\$600	\$600	\$600	(4 year old only)		
INTERMEDIATE AMATEUR	1\$545 2\$1	,120*	\$600	\$600	\$600			
LTE: \$25,001- \$99,999	Total with Two Payment	ts: \$1,665	\$600	\$600	\$600			
LIMITED AMATEUR	1\$345 2\$	920*	\$600	\$600	\$600			
LTE Cap: \$25,000	Total with Two Payment	-	\$000	\$000	\$000			
COMBO ENTRY:	1\$1,540 2\$	-						
AMATEUR + INT + LIMITED	Total with Two Payments: \$3,095							
COMBO ENTRY:	1\$1,195 2\$1,490* Combination entries ric					le to the herd one		
AMATEUR + INTERMEDIATE	Total with Two Payments: \$2,685 1\$995 2\$1,290*							
COMBO ENTRY:					•			
AMATEUR + LIMITED	Total with Two Payment	-	combinati	ion entries.				
COMBO ENTRY:	1\$890 2\$1	•						
INTERMEDIATE + LIMITED *\$20 PAC Fee included: Under Texas Election Code, Chap	Total with Two Payment		on. Funding the PAC	is important to be ab	ole to maintain state fu	unding at the NCHA	Triple Crown	
events. Your contribution will provide critical assistance t							pic crown	
Rider #:	Rider Name:							
Horse Name:			_ Horse Re	egistration	ı #:			
Owner #: 0	Owner Name:							
Owner Street Address:						*^11	-4-	
Owner City, State, Zip:					re	Refundable Hansaction		
Best Contact Phone: Email:								
Yes, Please Subscribe me to text updates. Mobile/Cell #					ite			
						waive the fe		
Correspondent:						payment is submitted by check, Wire Transfer or ACH/E-check.		
Address:								
City / State / Zip:								
Best Contact Phone:	Email:							
neresty released from all dallins, demands, or eduses or determ or any kind or nature whatsoever,			/ith Check (Enclosed) Pay With Credit Card*					
whether now existing or to hereafter accrue, on account result of any bodily injury, loss or damage to any animals	, equipment or other personal property,	Card Numb	or					
from any cause whatsoever including, but not limited to, the sole or concurrent negligence of NCHA, its directors, officers, employees, agents to 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			ard:					
participation of the horse (s) described herein in this eve	nt and the undersigned indemnifies the	Billing Stree	t Address:					
NCHA from all claims, demands, or causes of action bases rider of any horse entered in an NCHA produced event, implementation of any action allowed by Standing Rule management or judge and Standing Rule 35A Medication	by said entry, consents to the 35.a, Zero Tolerance by either show				Date:			
I agree to all rules, terms and condition	·	on nchacutting.	com					
Make Checks Payable to: Owner Rider Other Name:					(W-9 Required for all payees)			
Signature:	Parent /	Legal Guardia Intestant is under 21 y	an: ears of age both con	testant and parent c	or legal guardian must	sign this form		