

****DEADLINES****

Entries must be postmarked by 02/01/2025

All late entries must be received by 02/10/2025

****WHAT TO INCLUDE IN YOUR PACKET****

- Completed W9 (for **OWNER**)
- Completed entry form & payment
- Completed indemnity agreement (page 3)
- Copy of horse registration papers showing the current owner.
- Copy of birth certificate (or current breed association card showing birthdate) for youth exhibitors.
- Copy of amateur card for amateur class entries.

HORSE SHOW CONTACT INFORMATION

Phone Number: 832-667-1012

Mailing Address:

Website: www.rodeohouston.com

3 NRG Park

Email: horseshow@rodeohouston.com

Houston, TX 77054

OWNER INFORMATION (person listed on horse registration papers – ONE NAME ONLY)

Name _____	Social Security # (last 4 digits) _____	Phone # _____
Address _____	Email _____	
City, State, Zip Code _____	Signature _____	

HORSE INFORMATION (one horse per entry form ONLY)

Registered Name _____	Registered # _____
Trainer Name _____	Foal Year _____

EXHIBITOR(S) INFORMATION (birthdates are REQUIRED for youth exhibitors)

Exhibitor A Name _____	Birthdate _____	Phone # _____
Address _____	Relation to Owner _____	
City, State, Zip Code _____	Signature _____	

Exhibitor B Name _____	Birthdate _____	Phone # _____
Address _____	Relation to Owner _____	
City, State, Zip Code _____	Signature _____	

PAYOR INFORMATION

Payor Name: _____	Phone: _____
Address: _____	Email: _____
City/State/Zip: _____	Send Correspondence To: <input type="checkbox"/> Owner <input type="checkbox"/> Payor

CLASS ENTRY (please designate exhibitor letter from page 1 in the "EXH" column)

EXH	Class	Class Description	Entry Fee
	1	Open Division	\$1,000
	2	Amateur Division	\$1,000
	3	Youth Division	\$500

FEE SUMMARY

Total Entry Fees	\$
Stall <i>(required)</i>	# of stalls _____ X \$40 per stall = \$
Tack Stall	# of tack stalls _____ X \$40 per stall = \$
Office Charge <i>(\$20/horse- pay once per breed)</i>	\$ 20.00
Late Entry Fee <i>(Class fee is <u>doubled</u> for any entry postmarked after <u>2/1/25</u>)</i>	\$
TOTAL	\$

PAYMENT INFORMATION

<input type="checkbox"/> Cash	<input type="checkbox"/> Visa	_____	Authorization Signature:
<input type="checkbox"/> Check	<input type="checkbox"/> Mastercard	_____	Name on Card
Check # _____	<input type="checkbox"/> AMEX	_____	Credit Card # _____
** Make payable to: HLSR	<input type="checkbox"/> Discover	_____	Exp. Date _____

As valid consideration for entry into and participation in activities (the "Activities") with Houston Livestock Show and Rodeo, Inc., Houston Livestock Show and Rodeo Educational Fund and Corral Club, Inc. (collectively, "HLSR"), the undersigned hereby enters into this RELEASE OF LIABILITY AND INDEMNITY AGREEMENT (this "Agreement"). **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 OR FARM OWNER OR LESSEE IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN FARM ANIMAL ACTIVITIES, INCLUDING AN EMPLOYEE OR INDEPENDENT CONTRACTOR, RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL ACTIVITIES. UNDER CHAPTER 87, TEXAS CIVIL PRACTICE AND REMEDIES CODE, 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. RELEASE FROM LIABILITY:** The undersigned hereby RELEASES, ACQUITS AND FOREVER DISCHARGES HLSR, its subsidiaries and affiliates and its and their present and former directors, officers, employees, agents, volunteers, 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, judgments, settlements, expenses (including, but not limited to, reasonable attorneys' fees), and/or demands for personal injury, death and/or property damage, accrued or to accrue in the future, known or unknown, (collectively, "Claims") relating to or arising out of any negligent acts in connection with his/her entry into and participation in the Activities, including but not limited to the **NEGLIGENT ACTIONS OF THE HLSR PARTIES, REGARDLESS OF WHETHER SUCH NEGLIGENCE WAS THE SOLE, PROXIMATE OR PRODUCING CAUSE OF THE CLAIMS. AGREEMENT TO INDEMNIFY AND HOLD HARMLESS: THE UNDERSIGNED AGREES TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE HLSR PARTIES** from any and all claims, causes of action, suits, judgments, settlements, expenses (including, but not limited to, reasonable attorneys' fees), and/or demands for personal injury, death or property damage, accrued or to accrue in the future, known or unknown, (collectively, "Claims"), including but not limited to Claims resulting from **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 as to any and all claims, causes of action, suits, demands, settlements, judgments and/or expenses (including, but not limited to, reasonable attorneys' fees) made by, through, or under the undersigned against the HLSR Parties related to the undersigned's entry into and participation in the Activities. PHOTOGRAPH/INTERVIEW RELEASE AND INDEMNITY:** The undersigned GRANTS PERMISSION to be PHOTOGRAPHED, VIDEOED, RECORDED and/or INTERVIEWED in connection with the Activities. The undersigned understand that such photographs, videos, recordings and/or interviews may be used by HLSR Parties and/or television, film, video, visual, graphic, printed and/or social media. The undersigned agrees to **RELEASE** and **INDEMNIFY** HLSR Parties for any Claims related to photographs, videos, recordings and/or interviews by the HLSR Parties or any media. **TEXAS LAW AND ARBITRATION:** The undersigned understands that this Agreement shall be binding on his/her heirs, executors, successors and assigns, that this Agreement will be governed by the laws of Texas, and that jurisdiction and proper venue for any dispute regarding this Agreement shall be in a State Court in Harris County, Texas. If any part of this Agreement is determined to be invalid or 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. HLSR may require that all claims or disputes between the undersigned and HLSR and/or its agents, officers, directors volunteers, members and assigns, in any way arising out of or related to this Agreement, shall be decided by binding arbitration administered by the American Arbitration Association ("AAA") pursuant to the Federal Arbitration Act, 9 U.S.C., 1, et seq. and in accordance with the Commercial Arbitration Rules of the AAA that are in effect at the time the demand for arbitration is filed, unless the parties mutually agree otherwise in writing. The decision of the arbitrator(s), which shall state findings of fact and conclusions of law, shall be final, conclusive and binding on the parties and judgment may be entered thereon in the District Court of Harris County, Texas, to enforce the decision. **COMPREHENSION AND AUTHORITY.** The undersigned certifies that he/she has read, understand and will abide by all rules and regulations of the Houston Livestock Show and Rodeo, including but not limited to, the Horse Show Exhibitor Handbook. 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.

By signing below you are stating that you have read the above Agreement in its entirety and agree to all of the terms and conditions stated.

Printed Legal Name _____

Signed Legal Name _____

Date _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

Date _____

PLEASE MARK ALL SHOWS ENTERED BELOW

<input type="checkbox"/> NCHA	<input type="checkbox"/> Youth Horse Show	<input type="checkbox"/> Quarter Horse Speed
<input type="checkbox"/> Ranch Sorting	<input type="checkbox"/> Paint Horse Show	<input type="checkbox"/> Quarter Horse Roping
<input type="checkbox"/> Ranch Rodeo	<input type="checkbox"/> Ranch Horse Show	<input type="checkbox"/> Junior Invitational
<input type="checkbox"/> Youth Ranch Rodeo	<input type="checkbox"/> Ranch Horse Challenge	

W-9 FORM (must be completed by the owner of the horse)

Form W-9 (Rev. March 2024) Department of the Treasury Internal Revenue Service	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.
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Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<table border="1" style="width:100%"> <tr> <td style="width:10%; vertical-align:top;"> 1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) </td> <td style="width:90%; height: 30px;"></td> </tr> <tr> <td style="vertical-align:top;"> 2 Business name/disregarded entity name, if different from above. </td> <td style="width:90%; height: 30px;"></td> </tr> <tr> <td style="vertical-align:top;"> 3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) </td> <td style="width:90%; vertical-align:top;"> 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.) </td> </tr> <tr> <td style="vertical-align:top;"> 3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/> </td> <td style="width:90%;"></td> </tr> <tr> <td style="vertical-align:top;"> 5 Address (number, street, and apt. or suite no.). See instructions. </td> <td style="width:90%; vertical-align:top;"> Requester's name and address (optional) </td> </tr> <tr> <td style="vertical-align:top;"> 6 City, state, and ZIP code </td> <td style="width:90%;"></td> </tr> <tr> <td style="vertical-align:top;"> 7 List account number(s) here (optional) </td> <td style="width:90%;"></td> </tr> </table>	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		2 Business name/disregarded entity name, if different from above.		3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>		5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	6 City, state, and ZIP code		7 List account number(s) here (optional)	
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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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
[][][] - [][] - [][][][][][][][][]
or
Employer identification number
[][][] - [][][][][][][][][][]

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. citizen or other U.S. person (defined below); and
- 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, payments 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
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