

2010 South Point Futurity & Aged Event

South Point Equestrian Center, Las Vegas, Nevada
 Aged Event - October 10-16, 2010
 Open Cutting - October 7, 8 & 9, 2010

OWNER _____ NCHA# _____ Email _____

Address _____ Phone (_____) _____

City/State/Zip _____ FAX (_____) _____

RIDER (If not owner) _____ NCHA# _____

Address _____ Phone (_____) _____

City/State/Zip _____ FAX (_____) _____

Make premium checks payable to: _____ **SS or Ed. ID #** _____

The Internal Revenue Service requires us to withhold income tax on premium monies won at a rate of 31% on all taxpayers who do not provide a Taxpayer Identification Number (Social Security No. or Fed ID No.). Please be sure to provide this on your entry form.

One Aged Event Entry Form Per Horse

HORSE _____ < Registration Papers Required >

Payment Due
9/15/10

FUTURITY

| | | |
|--------------------------|--|---------|
| <input type="checkbox"/> | 3 Open \$25,000 Added | \$1,170 |
| <input type="checkbox"/> | 3 Open gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 3 Non Pro \$10,000 Added | \$920 |
| <input type="checkbox"/> | 3 Non Pro gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 3 Non Pro \$250,000 Ltd Rider (class within a class) | \$370 |

Includes \$10 video fee

DERBY

| | | |
|--------------------------|--|---------|
| <input type="checkbox"/> | 4 Open \$25,000 Added | \$1,170 |
| <input type="checkbox"/> | 4 Open gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 4 Non Pro \$15,000 Added | \$1,050 |
| <input type="checkbox"/> | 4 Non Pro gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 4 Non Pro \$250,000 Ltd Rider (class within a class) | \$370 |
| <input type="checkbox"/> | 4 Amateur \$3,000 Added | \$590 |

Includes \$10 video fee

CLASSIC/CHALLENGE

| | | |
|--------------------------|--|---------|
| <input type="checkbox"/> | 5/6 Open \$25,000 Added | \$1,170 |
| <input type="checkbox"/> | 5/6 Open gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 5/6 Non Pro \$15,000 Added | \$1,050 |
| <input type="checkbox"/> | 5/6 Non Pro gelding (class within a class) | \$370 |
| <input type="checkbox"/> | 5/6 Non Pro \$250,000 Ltd Rider (class within a class) | \$370 |
| <input type="checkbox"/> | 5/6 Amateur \$3,000 Added | \$590 |

includes \$10 video fee

Total Entry Fee includes \$10 video fee where applicable.

****LATE FEES after 9/15
 Open & Non Pro divisions - \$300,
 Amateur divisions - \$200**

Total Entry Fees _____

Late Fees ()** _____

Stalls _____
 (see stall reservation form)

Total Paid _____

Make checks payable to:

**Rocking K Productions
 c/o Kathryn Webb
 7493 N. 9150 W.
 Lehi, UT 84043**

Questions? 801-768-0866

**South Point Hotel, Casino & Spa
 Call 866-791-7626**

Release From Liability & Waiver of Responsibility

As a condition of participation in this event, the Rocking K Production Events, its directors, officers, employees, members, agents and representatives ARE HEREBY RELEASED from all claims, demands or causes of action of any kind of nature whatsoever, whether now existing or to hereafter accrue, on account of any damages, cost or expense (i) AS A RESULT OF ANY 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 ROCKING K PRODUCTIONS/SOUTH COAST EQUESTRIAN CENTER, ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS OR REPRESENTATIVES; or (ii) as a result of the interpretation or enforcement of the ROCKING K PRODUCTIONS Bylaws, Rules or Regulations and the risk of any such damage, cost or expense which may occur by reason of foregoing 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 the horse(s) described herein in this event and the undersigned indemnified the ROCKING K PRODUCTIONS/SOUTH POINT EQUESTRIAN CENTER from all claims, demands or causes or action based on any of the foregoing.

Signature of Authorized Agent _____ Date _____