

2019 NCHA SUPER STAKES CLASSIC

THE 5/6 YEAR-OLD LIMITED OPEN

1. 2019 NCHA Super Stakes Classic Limited Open will be limited to riders whose cutting lifetime earnings are less than **\$200,000 during the previous two (2) point years** (LAE & Weekend earnings) as of January 1, 2019. **NCHA Open Hall of Fame members are ineligible to compete.** See rule #6 below.
 - a. The Open class limitation for riders is based on **ALL (NCHA and non NCHA) earnings** and is open to any eligible rider regardless of Open or Non-Professional status.
2. Nomination fees for Limited Open Contest:

On or before **January 15, 2019** **\$1,630***

*(\$1175 jackpotted / \$325 office charge / \$50 NCHA fee / \$25 medication fee / \$35 Processing fee / \$20 PAC)

There will be a 10-day grace period. (Official postmark by US Postal Service) Late entries will be accepted after the draw, but before the beginning of the first go-round by paying a 50% penalty. In addition, a one percent (1%) deduction will be made for the NCHA Special Events Fund.
3. The high scoring twenty percent (20%), with a minimum of six (6) and a maximum of twenty (20), will advance to the finals. Scores from the go-round will determine the top twenty percent (20%).
 - a. In the event there are less than twenty-five (25) entries in a class, as of Feb. 15, 2019, there will not be a working finals. Payout will be made according to the

- NCHA mandatory payout, **to the highest advancing horse.**
- b. All finalists will receive premium checks.
 4. All finalists will be required to pay an additional cattle charge in the amount of \$225 per horse. Deduction will be made from premium check for this charge.
 5. Riders may ride two (2) horses of any sex in the Limited Open Classic (5/6-year-old).
 6. **All riders that have cutting earnings from any organization (including but not necessarily limited to ACHA, AQHA, Australian, etc) other than NCHA earnings must verify their lifetime earnings with the NCHA by signing this form stating that they are eligible to compete in this class. If a rider has attempted to compete in these classes and is found to be ineligible, disciplinary action will be taken. The burden of proof of eligibility is upon the rider.**

Riders signature below.....

7. All rules of the 2019 NCHA Super Stakes and Super Stakes Classic will apply in this event where applicable.

For Foals of 2013, 2014 THE LIMITED OPEN 5/6 YEAR-OLD ONLY

RIDER & NCHA #	DIVISION	HORSE & REG NO.	OWNER & NCHA #
	LTD Open 5/6 YR OLD ONLY		
# _____		# _____	# _____
# _____		# _____	# _____

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

RELEASE FROM LIABILITY AND WAIVER OF RESPONSIBILITY

As a condition to participate in this event, the NCHA, its 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 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 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.

Owner _____ Address _____
 (as it will be listed in the event program)

City, State, Zip _____ Daytime Phone _____

Signed by: _____ NCHA ID No. _____

Correspondent _____ Address _____

City, State, Zip _____ Daytime Phone _____

Signed by: _____ NCHA ID No. _____

*Photocopy of registration certificate or colored application for unregistered horses must accompany this application. Send to:
 NCHA, 260 Bailey Avenue • Fort Worth, Texas 76107-1862 • (817) 244-6188 • fax 817-244-2015*

Premium checks will be made to the Registered owner of the horse. S.S. or Corp. ID must be on file with NCHA.

*The Internal Revenue Service is now requiring NCHA to withhold income tax on premium monies won at a rate of 28% on all taxpayers who do not provide a Taxpayer identification Number (Social Security No. or Business ID No.). Please be sure to provide this information to NCHA accounting department.

MasterCard Visa Card AmEx Discover Card Number _____

Amount \$ _____ Exp. Date _____ 3 digit security code _____