

**PACIFIC COAST CUTTING HORSE ASSOCIATION
GELDING STAKES
FLAT FEE CONSIGNERS CONTRACT**

1. This year's program is limited to three-year old geldings and/or stallions (foals of 2011) that are sired by year 2015 PCCHA Subscribed Stallions.
2. All geldings and/or stallions consigned through this program shall become eligible for nomination to the 2014 PCCHA Gelding Stakes.
3. A non-refundable nomination fee must accompany this agreement. This amount shall be added to the purse. Fee Structure as follows: December 31st Yearling Year - \$500; December 31st – 2 Year Old Year - \$1,500; August 31st of 3 Year Old Year - \$2,500; Up until show time at the Futurity - \$3,500.
4. PCCHA reserves the right to reject any entry at any time upon offer of return of entry fee.
5. Stallions consigned through this program must furnish proof of castration 30 days prior to the 2014 PCCHA Gelding Stakes.
6. Consigners agree to hold PCCHA, its employees, directors and members harmless from any and all liability including but not limited to attorney fees, court costs, etc., in connection with this program.
7. Consignors must submit a copy of registration papers or embryo transfer information with entry.
8. **Requirements for unregistered or embryo transfer consignments:** any unregistered flat fee consignment must submit a signed breeder's certificate from the owner of the sire, proof of parentage on both sire and dam by blood typing (blood typing to be done at a lab approved by PCCHA), current photographs (both sides, front and back), and a notarized bill of sale.
9. Any entry in this program that fails to provide copies of either breed registration or unregistered consignment information shall be scratched and **all fees shall be forfeited.**
10. PCCHA reserves the right, at its sole discretion, to change, alter or modify the foregoing terms and conditions at any time prior to the Gelding Stakes without any liability to the owner.
11. I represent that I have read all the foregoing terms and conditions of this contract and have signed such with full and complete understanding thereof, and that all information provided by me in connection is true and accurate to the best of my knowledge and belief.

YEAR FOALED: _____

NOMINATION FEE OPTIONS - PLEASE CHECK ONE			
<input type="checkbox"/> Yearling year – 12/31 \$ 500	<input type="checkbox"/> 2 yr. old Year – 12/31 \$1,500	<input type="checkbox"/> 3 yr. old Year – B4 8/31 \$2,500	<input type="checkbox"/> 3 yr. old Year up to show time \$3,500
Name of Horse: (Please include Copy of Registration Papers)			
Sire:			
Owner Name:			
Address:			
City, State, Zip:			
Phone # - Fax #:			
E-Mail:		Check #:	Total Amt: \$
Signature:			Date:

Pacific Coast Cutting Horse Association

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