**2016 ABBI MATURITY Entry Form**

**REQUIREMENTS FOR ENTRY:**

**(Bulls Born Between Jan. 1, 2011 and Earlier)**

* A completed entry form for each bull entered.
* Maturity bulls must be registered in the Owner/Partnership inventory entering the animal.
* 2016 Classic Money Winners are not eligible.
* The top 30 bulls from the Top 30 PBR bulls list are not eligible.  The list will be posted on the ABBI website as of the day books open for each event.
* Maturity bulls do not have to be Age Certified/ EID tagged.
* No parent penalties will be charged.
* Maturity earnings will NOT count toward the ABBI World Finals.
* Current Health papers are required for check-in including proof of **negative TB & Brucellosis** tests completed within calendar year of event entered.
* PBR reserves the right to scratch an animal for non-performance from any event including the World Finals.
* **The completed form and complete payment must be submitted together by the close of books or the entry will not be accepted. NO EXCEPTIONS.**

**Event Location**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner/Partnership (to be listed for the event):

Winnings Paid To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If earnings are to be paid out to anyone other than owner of the bull, a notarized member agreement for competition partnership form must be included, and signed by all parties, with this entry form. Owner is defined as the person whom has the bull in his/her inventory at time of entry. A current Year W-9 form must be on file for the member that will receive any earnings.**

ABBI Member #: \_\_\_\_\_\_\_\_\_\_\_\_\_ Owner Name:

Owner Phone: ­­­­­­­­­­­­­ E-mail/fax for event info: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: State: ZIP/Postal Code:

Transporter Name: Transporter Phone:

BULL ID (hip brand) #: BULLNAME:

ABBI Reg. # CHUTE DELIVERY**:**

I, as an entering bull owner, have read and understand the ABBI guidelines. I assume all risk and danger incidental to the nature of bucking bull competitions and release ABBI, PBR, their host sites, title sponsors, host organizations, participating owners, their animals, and all agents thereof from any and all liabilities resulting from such cases. Entering bull owners also recognize that the event producer has contracted professionals in the fields of Judging and Veterinary Medicine and the decisions of those individuals contracted is final. I concede to any/all Rules, Regulations, Guidelines, and Disclaimers printed in the ABBI Guidelines and stated herein. Bull owners must sign the entry form.

Owner Signature: Date:

Any attempt to copy or duplicate this program is strictly prohibited. All rules, regulations, guidelines, terms, and conditions contained herein are subject to change for the benefit of the event in its entirety with consent of the event producer. ABBI reserves the right to accept or exclude parties on entrance based on the benefit of the event in its entirety. The above parties and/or their employees do not warrant, expressed or implied, information provided by the owners in the futurity, and/or the authenticity of animals registered, competing, or sold. The above stated parties and/or their employees or agents are not responsible and/or liable in any form or fashion for any accident or injury of any nature to any owner, livestock, or any person involved in this event.

* **$ (US Funds) per bull entered. Cashier’s Check, Check, or Money Order accepted. Payment MUST be in the office by Close of Books. NO EXCEPTIONS.**
* **Authorized signature for the credit card list below: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Name on Credit Card : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type (VISA/MC/AMEXP/Discover)**
* **Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_ State/Province \_\_\_\_\_\_\_ Country\_\_\_\_**

**Exp. Date: \_\_\_\_\_\_\_\_\_\_\_CSV \_\_\_\_\_\_\_\_\_\_\_ (back of card) Billing ZIP/POSTAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Remit forms and payments to: **ABBI 101 W. Riverwalk, Pueblo CO 81003**

**Fax 719-242-2746. Please call 719-242-2747 to verify receipt of the fax.**