



EVENT PLANNING GUIDE

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION
590 HIGHWAY 105, BOX 150
MONUMENT, COLORADO 80132
PHONE 1-866-430-8114 AND FAX (719) 487-9014
WEB: WWW.NVRHA.ORG

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NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

APPLICATION TO NVRHA FOR EVENT SPONSORSHIP

590 HWY 105 BOX 150
MONUMENT, CO 80132

1. Date of Event: _____

2. Recommended Advertising Media

Name: _____

Address: _____

Telephone Number: _____

3. Budget Attached !

4. Registration Date: _____

Staff Cost: _____

Participant Cost: _____

Clinicians: _____

Location: _____

Event Manager Name: _____

Email: _____

Phone #: _____

5. Proposed Flyer Attached !

6. Expected Attendance _____

Please provide as much detail information as possible to give NVRHA confidence to support EVENT SPONSORSHIP request. Call Tim Rose @ 719-520-1000 timwrose@aol.com or Bill Hauschildt @ 719-499-1666 billh@centralstatesroofing.com with any questions.

NVRHA Sponsorship Approval

By: _____
NVRHA OFFICAL REPRESENTATIVE

Approval Date: _____

Telephone 1-866-430-8114/Fax: (719) 487-9014

www.NVRHA.ORG

1. Date

Consider the following:

Conflict with horse events and other significant events.

Weather complications (indoor arena, alternate plan).

Availability of key people.

2. Facility

Need at least 2 arenas

Arena cattle holding (fencing)

Arena ground (watering/working)

If arena is large enough to be divided and is planned for 2 clinicians, panel availability for dividing – screening.

Stalls (need at least 16 for starter events). What if we have 24? (locals/haul-ins)

Determine cost for stalls (normally charge \$5.00 more to insure break even).

Who cleans stalls? Include cleaning cost for stall if possible, otherwise, charge deposit.

Cattle holding pens (accessibility to arena)

Off-loading chute (semi transporting cattle)

Working cow (suitability for single cow separation)

Area for trail class (obstacles-gate, log and bridge, etc)

Loudspeaker system for cattle working arena.

Requirements for arena deposit.

Availability of breakfast/lunch vendor.

Availability of restrooms facilities, trash cans and any table/chair rental items.

3. Cattle

Availability (prefer no horned cattle).

Do not use cattle that have been roped.

Cost (include transportation) from cattle supplier.

Hay (cost for event duration) and water and who's going to facilitate this

Suppliers given estimate of number of cattle required (usually about 2 cows per participant for competition clinics and 1 cow per participant for competition only events).

4. Clinician

Who to hire and focus of event? (Cutting, working, roping, etc). (see list of NVRHA approved Clinicians & Judges at end of this chapter)

Cost? Include lodging, travel, and subsistence.

Discuss arrangements for limiting number of clinicians (if planning a 24 participant clinic and only enroll 16-must reduce clinicians from 3 to 2).

Generally, 1 clinician per 8-10 participants.

If combining clinic and competition:

- Clinic Day(s) - 1/9 participants. Example 27 participants. Total with 9 per group then 3 clinicians needed.
- Competition Day - for 24 participants you only need 1 judge needed, if "Conformation Class" is completed night before.
- Competition Day - for 27 participants you need 2 judges & "Conformation Class" can be completed as the first event on "Competition Day"
- Clinician/Judge must be approved by NVRHA

5. Advertising

Develop a very attractive flyer 3-4 months prior your event date.

Distribute to Event Managers of other events and locally post. Advertise in local newspaper and magazine, if affordable. Post in local feed and tack shops.

Identify a media that will reach the target market audience within a reasonable travel distance. Have your flyer published about 6 weeks to 2 months prior.

Identify and scope all items needed for event registration (form to be developed by NVRHA). If competition, flyer must state when your Conformation class will be. (4:00 pm the afternoon before day of the schooling competition or the day of the schooling competition) If you want to attract participants who just want to attend the schooling competition, then the Conformation Class should be the day of the schooling competition.

Flyer should include:

- Location
- Date
- Cost
- Clinicians
- Clinic Specifics (cutting, reining, roping, working cow, etc.)
- Motel Info.
- Social Event
- Meal Info.
- Camping Info.
- Stalling Info. (shavings available for purchase or bring own)
- Contact Person Info.
- Registration Form available on **NVRHA.org**

6. Logistics & Awards

Items to be included in budget:

a. Ribbons

Small events: 1-3 each class, each division plus all-around and reserve all-around.
About \$150.00

Large events: 1-5 each class, each division plus all-around and reserve all-around.
About \$200.00

b. Cattle numbers

Recommend over the back numbers/glue or exhibitor back numbers (from feed dealership) Get 2 duplicate sets- low numbers preferred. Apply to cattle with adhesive. Refer to the "Cattle Chapter" for additional information/recommendations.

c. Awards- use sponsors for awards except ribbons.

Purchase your ribbons from; Cindy Abshire RockyMtnHiQH@intergate.com

1050 Richfield Street

Aurora, Colorado 80011

Voice: 303-360-7605 FAX: 719-487-9014.

(SEE ORDER FORM AT END OF THIS CHAPTER)

7. Social

Encourage an evening event on the grounds if possible (for small towns, events off the grounds may be better). Judgment call (the idea is to promote fun and friendship).

Provide accommodations for trailer hookups as a priority.

Use printed tickets for meals to insure accountability.

Collect for social events as part of registration – allow for ticket purchase at event for guest/last minute.

Check with local vendors/restaurants for meal pricing to be included in registration form.

8. Volunteers/Labor Required

Overall cattle manager (off-loading, feeding, moving, clinician support) usually a volunteer.

Prep for competition – number cattle. Need volunteer with cattle handling experience and at least 2 helpers – night before competition.

Day of competition:

Scribe (1 per judge)

Runners

Gate person (cattle arena)

Announcer

Timekeeper

2 admin for score tabulation – one computer literate.

Cattle Manager (2-3 people during working ranch horse class).

Couple of extra people for backup and arena support (trail obstacles, cutting, pen panels, etc.).

9. Ways to Reduce Cost

Use ½ days for pricing judges (ex. Better to have 2 judges for 1/2 day then 1 judge for full day). More fun, gets people home earlier.

Have judge stay at a home (donated) rather than a motel and feed him.

Use husband and wife clinicians.

Have clinicians commute together.

Careful use of cattle reduces number required.

Limit number of horses a clinician brings to one – use local horse if possible to prevent need to haul and need for stall space.

Hire local laborer or volunteer to clean stalls if needed.

Note on registration form for participant to bring shavings unless vendor managed, do not handle bedding.

Try to avoid any cash payment at the event (handle through registration).

Use local 4-h volunteers if possible.

10. Budget Development (Guidelines)

Base budget on 16 participants, 2 clinicians for clinic, one judge for competition and 32 cows.

Typical Budget

a. Facility	2 days @\$500.00	\$1,000.00
b. Clinicians/Judge	clinician #1 - 1 day@ \$500.00 (mileage & meals) 100 miles @0.40 plus 2 meals	\$ 500.00 \$ 60.00
	clinician #2 (also judge) 2 days @ \$500.00 (mileage & meals) (lodging) 2 nights	\$1,000.00 \$ 150.00 \$ 160.00
c. Cattle	32 head @\$30.00 (transportation included) feed numbers/glue	\$ 960.00 \$ 100.00 \$ 55.00
d. Registration Fee	16 participants @\$20	\$ 320.00
e. Insurance	2 days @ 80.00 per day	\$ 160.00
f. Miscellaneous	advertisement ribbons	\$ 150.00 \$ 150.00
		<hr/>
		\$4,765.00
	Contingency 10%	\$ 475.50
	Total:	<u>\$5,241.50</u>

11. Participant Cost:

\$5,241.50 divided by 16 participants = \$327.60 (charge \$328.00)

Note: As clinic size grows, cost/participant decreases. Our goal is to not charge more than \$185.00 per day.

Example: if 2 additional participants were added, costs would increase by only \$160.00 and cost/participant would decrease.

\$5,241.5 + \$160.00 divide by 18 participants = \$300.08 (charge \$300.00)

However, with 10 participants per clinician, quality/individual work time is very adversely affected.

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

RIBBON ORDER FORM

Please use this form to order ribbons for your event and either e-mail, mail or fax it to:

Cindy Abshire RockyMtnHiQH@intergate.com
1050 Richfield Street
Aurora, Colorado 80011
Voice: 303-360-7605 FAX: 719-487-9014

Event Name

Date(s) of event

Contact information, name, address, phone number, and e-mail:

Form with fields for contact information and a specific 'Phone Number' field.

Please enter the number of ribbons you require for each division. If you do not need ribbons for one of the divisions, please enter a zero.

Division:

How many places?
First through Sixth?

Cost (for NVRHA use only)

Table with 3 columns: Division (Advanced, Intermediate, Novice, Youth), How many places?, and Cost.

If you have unused ribbons after the conclusion of your event -- and in order to be eligible to receive a credit -- please carefully return them within 2 weeks after your event to Cindy Abshire at the above address.

Basic Web Content Submission Guidelines

To minimize the cost and improve response times for Web Site updates I am recommending a few things in content that is submitted for the site. The reason for doing this is that there is a big difference in what may work well on your personal computer, and what should be presented on a web page where you must consider that not all visitors will have the same software, or internet connection speed. Many formats are also too large to effectively be presented on the web to someone who may be using a modem, and also consume huge amounts of disk space which reduces the amount of content you can provide unless we increase the size of your web account. Another fact that many people don't know is that graphic content displayed on web pages is standardized at 72 dpi vs printed content which can go anywhere from 300 – 1200 dpi and is significantly larger.

1. *My preferred format is plain text or a Word document* if it is something like an event flyer or web page content. Many folks have been submitting PDF's of their events which are improperly formatted for web presentation. An example would be several which I converted back to Word (lengthy process) which were over 5 megabytes in size as submitted, and after conversion and recreating the PDF we ended up with a file that is 1/20th the size. If I had the original Word document or whatever they created the content in I could have simply created the proper format PDF from it. Folks have also submitted things like PowerPoint presentations which while work great in a conference room, are useless for the web and incur a lot of extra time getting to a usable format. Some flyers have been submitted as graphic files even though they contain textual content, this presents a problem in that a usable graphic file is so huge it is unwieldy for your modem users, and I would actually have to recreate it in something like Word etc to make something that works well.
2. My preferred format for Graphic content is to get the single images in their original form, there are many ways to make slideshows that work well on CD or DVD, but won't work on the web. Also folks have submitted images as PDF files rather than the original graphic file which I can then format for the web. A PDF requires me to pull the graphic out of it and then use it, again sometimes costly in time. Formats like .jpg (jpeg) .tif (Tiff).gif (GIF) .png (PNG) are the best. We can also convert a windows format graphic .wmf (WMF) but they typically are huge for you to email, so you might want to save as one of the other formats before sending.
3. We can convert most videos for the web, and can use most formats like .wmv or mpeg. What we do not want to receive is video that has been converted to flash. We actually create streaming flash from other formats, but cannot optimize correctly if we receive it as a flash file. A DVD works well. We can pull the video out of it with no problem.

Ultimately, our goal is to get the content in a form where we can get it on the web the fastest with a minimal cost to you.

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Membership Application

PLEASE CHECK ONE MEMBERSHIP AND COMPLETE INFORMATION BELOW

You can either enroll on-line or print off and mail to the address below.

<u>ANNUAL</u>	<u>*CREDIT</u>	<u>LIFE TIME</u>	<u>*CREDIT</u>
<input type="radio"/> Youth/Student	\$25.00 \$25.75	<input type="radio"/> Individual	\$300.00 \$309.00
<input type="radio"/> Individual	\$50.00 \$51.50	<input type="radio"/> Couples (2)	\$500.00 \$515.00
<input type="radio"/> Couples (2)	\$80.00 \$82.40	<input type="radio"/> Family (3+)	\$1,000.00 \$1,030.00
<input type="radio"/> Family (3+)	\$125.00 \$128.75		
<input type="radio"/> College	\$100.00 \$103.00		

* CREDIT CARD = 3% fee for credit or paypal payments.

TOTAL ENCLOSED: \$ _____

First Name: _____ Last Name: _____

Mailing Address: _____ DOB: _____

City/State: _____ Zip: _____

Phone: _____ Email: _____

If Couple or Family membership, please list all individuals names and birth dates:

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

*Note: You are invited to attend one NVRHA clinic and/or competition without becoming a member



Please send your check, money order or credit card information to: NVRHA, 590 Hwy 105, Box 150, Monument, Co 80132. To pay by credit card (M/C & Visa ONLY) complete below:
Fax 719-487-9014

Name on Credit Card: _____ Type: _____

Acct #: _____ Expiration date: _____
A 3% fee will be added to all credit card payments.

Signature: _____ Date: _____

- *All Annual Memberships expire December 31st*

**NATIONAL VERSATILITY RANCH HORSE ASSOCIATION
Event Registration Form**



Participant Name: _____ email: _____

Address: _____ City/State: _____ Zip: _____

Home Phone:() _____ Cell Phone:() _____

Registered Name of Horse: _____ Horse ID#: _____

Owner's Name: _____ **Permanent assigned Division (check):** Novice/Youth: _____
 Advanced/Youth: _____ Novice Amateur: _____ Inter. Amateur: _____ Adv. Amateur: _____ Professional/Open: _____
 Don't know: _____ For Rider Classifications by Division refer to the Rules & Regulations on our web site: NVRHA.org



PLEASE INDICATE WHAT EVENT YOU'RE ATTENDING AND COMPLETE ONE FORM PER HORSE/RIDER TEAM:

Event Name: _____ Location: _____ Date(s): _____

Registration Fee: \$ _____ = \$ _____

Stall Fee: \$ _____ x _____ nights = \$ _____

Social Event: \$ _____ /person x _____ people = \$ _____

Other (specify): \$ _____ x _____ = \$ _____

NVRHA Membership Fee: (see web for prices: www.nvrha.org) \$ _____

(Second time participants are required to become a member)

Please include a completed membership form also, if applicable **TOTAL: \$ _____**

Are you a current member? Yes No. Do you accept remuneration for training horses, giving riding instructions or related type activities? Yes No

Cancellation Policy: 15 days or more 100% refund; 14 days or less; decision by event manager to transfer fee to another event or partial refund determined by expenses; full refund if rider gets a paid replacement. NVRHA reserves the right to cancel an event within 48 hours prior to the event.

Payment: Make checks payable and mail to: NVRHA, 590 Hwy 105, Box 150, Monument, CO 80132, Telephone 1-866-430-8114 or Fax: (719) 487-9014. **To pay by credit card:** M/C or Visa ONLY:

Name: _____ CC #: _____

Expiration date: _____ A 3% fee will be added to all credit card payments.

Release: By signing below, I/We are waiving our right, if any, to claim against, maintain an action against, or recover from any equine activity sponsors, equine professionals, or any other person for injury, loss, damage, or death resulting from any of the inherent risks of this equine activity. I/We hereby request to enter the event indicated and agree to abide by the bylaws, standing rules, judging, and rules of the respective organizations involved with this event. I/We hereby release AQHA, NVRHA, and other involved organizations and its members and employees from any loss to myself, employees, agents, horses and/or equipment while attending and/or participating in this event. The provisions contained herein are hereby made a part of this entry agreement. In addition, the general understanding of any "publication, video, and internet consent and release agreement" is incorporated in this release including: no monetary considerations; photo, video or verbal statements may be used now and in subsequent years as the program deems fit; is binding upon heirs and/or future legal representatives.

 Signature - Participant, Parent/Guardian (under 18 years old) Date

Revised 1-27-10

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Approved Clinician/Judges List

Currently, we are revamping of our Clinician and Judge Certification Program. For up to date information, please call Jay Henson, our Clinician/ Judge Certification Program Director at (620) 544-8078-home or (620) 544-6919-cell or check the web site for periodic updates. Thank you.

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Ranch Horse Clinician Agreement

This signed agreement by _____, is a commitment to be a clinician for _____ NVRHA event to be held at _____ on the following date(s): _____.

The topic(s) of your session(s) is: _____

Your session(s) will be held from _____ to _____.

You will provide us with a detailed invoice following the event. Your fees are: \$_____ per _____. We will reimburse you for _____.

Your mileage charge is \$_____ per mile.

If there are not enough participants pre-registered to cover the expense of this event, NVRHA reserves the right to cancel this event within 48 hours prior, making this contract null and void. If for some reason you, the clinician, cannot attend, you will find a qualified replacement person for this event.

Please sign and return this agreement to: _____

Please send your **DETAILED INVOICE** along with the completed, 1st page, of the attached **FORM W-9** to: NVRHA, 590 Hwy. 105, Box 150, Monument, CO 80132 (*payment cannot be made until NVRHA has a completed FORM W-9 on file*) (*FORM W-9 only has to be submitted to NVRHA once every calendar year*)

Thank you for working with us on this event.

Date: _____

Date: _____

Signature – Event Manager

Signature – Clinician

Address: _____

Phone #: _____

Fax #: _____

NVRHA, 590 Hwy 105, Box 150, Monument, CO 80132
www.nvrha.org ~ Telephone 1-866-430-8114
Fax: (719) 487-9014

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Ranch Horse Judge Agreement

This signed agreement by judge, _____, is a commitment to be a Judge for _____ NVRHA event to be held at _____ on the following date(s) and times: _____.

Judging for the following events: _____ Ranch Trail, _____ Ranch Cutting, _____ Working Ranch Horse, _____ Ranch Riding, _____ Ranch Conformation.

You will provide us with a detailed invoice following the event. Your fees are: \$_____ per _____. We will reimburse you for _____. Your mileage charge is \$_____ per mile.

If there are not enough participants pre-registered to cover the expense of this event, NVRHA reserves the right to cancel this event within 48 hours prior, making this contract null and void. If for some reason you, the Judge, cannot attend, you will find a qualified replacement person for this event.

Please sign and return this agreement to: _____

Please send your **DETAILED INVOICE** along with the completed, 1st page, of the attached **FORM W-9** to: NVRHA, 590 Hwy. 105, Box 150, Monument, CO 80132
(payment cannot be made until NVRHA has a completed FORM W-9 on file) (FORM W-9 only has to be submitted to NVRHA once every calendar year)

Thank you for working with us on this event.

Date: _____ Date: _____

Signature – Event Manager

Signature – Judge

Address: _____

Phone #: _____

Fax #: _____

NVRHA, 590 Hwy 105, Box 150, Monument, CO 80132

www.nvrha.org ~ Telephone 1-866-430-8114

Fax: (719) 487-9014

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Ranch Horse Announcer Agreement

This signed agreement by, _____, is a commitment to be an announcer for _____ NVRHA event to be held at _____ on the following date(s) and times: _____.

Announcing for the following events: _____ Ranch Trail, _____ Ranch Cutting, _____ Working Ranch Horse, _____ Ranch Riding, _____ Ranch Conformation.

You will provide us with a detailed invoice following the event. Your fees are: \$_____ per _____. We will reimburse you for _____.

Your mileage charge is \$_____ per mile.

If there are not enough participants pre-registered to cover the expense of this event, NVRHA reserves the right to cancel this event within 48 hours prior, making this contract null and void. If for some reason you, the Announcer, cannot attend, you will find a qualified replacement person for this event.

Please sign and return this agreement to: _____

Please send your **DETAILED INVOICE** along with the completed, 1st page, of the attached **FORM W-9** to: NVRHA, 590 Hwy. 105, Box 150, Monument, CO 80132 (*payment cannot be made until NVRHA has a completed FORM W-9 on file*) (*FORM W-9 only has to be submitted to NVRHA once every calendar year*)

Thank you for working with us on this event.

Date: _____

Date: _____

Signature – Event Manager

Signature – Judge

Address: _____

Phone #: _____

Fax #: _____

NVRHA, 590 Hwy 105, Box 150, Monument, CO 80132

www.nvrha.org ~ Telephone 1-866-430-8114

Fax: (719) 487-9014

NVRHA

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

Ranch Horse Concessionaire/Catering Agreement

This signed agreement by concessionaire/caterer _____,
Is for _____ NVRHA event to be held
at _____ on the following date(s) and
times: _____.

Details include: _____

Please provide us with a detailed invoice following the NVRHA event. Your fees are:

If there are not enough participants pre-registered to cover the expense of this event, NVRHA reserves the right to cancel this event within 48 hours prior, making this contract null and void. If for some reason you, the concessionaire/caterer, cannot attend, you will find a qualified replacement person for this event.

Please sign and return this agreement to: _____

Please send your **DETAILED INVOICE** along with the completed, 1ST page, of the attached **FORM W-9** to: NVRHA, 590 Hwy. 105, Box 150, Monument, CO 80132 (*payment cannot be made until NVRHA has a completed FORM W-9 on file*) (*FORM W-9 only has to be submitted to NVRHA once every calendar year*)

Thank you for working with us on this event.

Date: _____ Date: _____

Signature – Event Manager

Signature – Concessionaire/Caterer
Address: _____
Phone #: _____
Fax #: _____

NVRHA, 590 Hwy 105, Box 150, Monument, CO 80132
www.nvrha.org ~ Telephone 1-866-430-8114
Fax: (719) 487-9014

IDENTIFICATION NUMBER APPLICATION

NVRHA Identification Number Application

I. Breed Registered Horses:

Name of Record: _____

Breed Registration No: _____

Breed: _____

A copy of the complete breed registration certificate must be submitted with this application.

II. Unregistered Horses:

Name of Horse: _____

1. Provide three color photos (4x6), to include full side view, both left and right and a front view.
2. Provide a declaration of ownership:

III. Declaration of Ownership:

I, _____ hereby certify that I am the owner of the horse identified as _____ as shown in application/photos attached.

Signed: _____

Address: _____

Date: _____

IV. Declaration of Amateur Status:

I, _____ hereby certify that I have not shown, judged, trained or assisted in training or instructed another person for remuneration in riding or training a horse for a period of two (2) years. (An Amateur may accept prizes, paybacks, or purses for events and maintain Amateur statue).

Signed: _____

Address: _____

Date: _____

V. Junior Horses: Junior Horses (5 years old or younger) provide a Signed Veterinarian Certificate of age.

Tax Form – W-9

<p>W-9 Form Rev. October 2007 Department of the Treasury Internal Revenue Service</p>	<p>Request for Taxpayer Identification Number and Certification</p>	<p>Give form to the requester. Do not send to the IRS.</p>
Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number : : : : : : : : :	or	Employer identification number : : : : : : : : :
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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 and 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).

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 on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity.

Sample Budgets

NVRHA EVENT BUDGET

DATE:

EVENT NAME:

EVENT MANAGER:

EVENT LOCATION:

PHONE:

FAX:

EVENT DATES:

CELL PHONE:

EMAIL:

	3 days	2 Days	1 day
RECOMMENDED PARTICIPANT FEE:	\$ 390.00	\$ 300.00	\$ 175.00

INCOME	Quantity	Fee	Amount	Totals
Participants (include \$20.00 for Registration) (3 days)	each		\$ -	
Participants (include \$20.00 for Registration) (2 days)	each			
Participants (include \$20.00 for Registration) (1 day)	each			
Stall Income (example, 4 horses, 3 nights, equals quantity of 12)	nights			
Social Event (1st Night) (i.e. dinner)	tickets			
Social Event (2nd Night) (i.e. dinner)	tickets			
Other				
Other				

TOTAL INCOME:

EXPENSES	Quantity	Fee	Amount	Totals
Facility Rental:				
Stall Expense (Reinburse Facility for Stalls)	nights			
Social Event (1st Night) (i.e. dinner)	tickets			
Social Event (2nd Night) (i.e. dinner)	tickets			
Other				
Other				
Cattle Head Fee (Calculate 2 head per Participant plus 5%)	head			
Cattle Transportation (insert 0 if included "Cattle Head Fee" above)	head			
Cattle Feed (insert 0 if included in "Cattle Head Fee" above)	bales			
Cattle Numbers (recommend Loftinvp.com "Tyvek" numbers) (20 per set)	sets			
Cattle Adhesive (recommend Rusco Livestock Tag Cement)	tubes			
Shipping Cost for Cattle Numbers & Adhesive	lot			
Clinician/Judge No. 1: 	days			
Travel	miles			
Lodging	nights			
Meals	meals			
Stall(s) (No. of Horses per Night times Total Nights)	nights			
Clinician/Judge No. 2: 	days			
Travel	miles			
Lodging	nights			
Meals	meals			
Stall(s) (No. of Horses per Night times Total Nights)	nights			
Clinician/Judge No. 3: 	days			
Travel	miles			
Lodging	nights			
Meals	meals			
Stall(s) (No. of Horses per Night times Total Nights)	nights			
Clinician/Judge No. 4: 	days			
Travel	miles			
Lodging	nights			
Meals	meals			
Stall(s) (No. of Horses per Night times Total Nights)	nights			

Rental Items	Quantity	Fee	Amount	Totals
Portable Restrooms	each			
Trash disposal (Per Participant)	each			
Tables & Chairs	lot			
Other				
Other				
Other				

NVRHA Administration Fee (Include \$20.00 per Participant)	each	\$ 20.00	\$ -	
NVRHA Insurance Premium (per day fee)	days	\$ 80.00	\$ -	
Event Manager Certificate (utilized towards a registration fee)	each			
Awards and Ribbons (if competition) (calculated by # of participants)	each			
Advertising/Misc. Printing Expenses	lot			
Participant Good Faith Expenses (i.e. bottled water, etc.)	each			
Other				
Other				
Contingency Fee (Insert Quantity of Participants)	each			

TOTAL EXPENSES: \$ -

Profit/(Loss) \$ -

NVRHA EVENT BUDGET

DATE:

EVENT NAME: Sample 2 - Day Event
 EVENT LOCATION:
 EVENT DATES:

EVENT MANAGER:
 PHONE: FAX:
 CELL PHONE:
 EMAIL:

	3 days	2 Days	1 day
RECOMMENDED PARTICIPANT FEE:	\$ 390.00	\$ 300.00	\$ 175.00

INCOME	Quantity	Fee	Amount	Totals
Participants (include \$20.00 for Registration) (3 days)		each \$ 380.00	\$ -	
Participants (include \$20.00 for Registration) (2 days)	19.00	each \$ 300.00	\$ 5,700.00	
Participants (include \$20.00 for Registration) (1 day)		each \$ 200.00	\$ -	
Stall Income (example, 4 horses, 3 nights, equals quantity of 12)	19.00	nights \$ 20.00	\$ 380.00	
Social Event (1st Night) (i.e. dinner)	19.00	tickets \$ 20.00	\$ 380.00	
Social Event (2nd Night) (i.e. dinner)		tickets \$ -	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	

TOTAL INCOME: **\$ 6,460.00**

EXPENSES	Quantity	Fee	Amount	Totals
Facility Rental:	2.00	days \$ 500.00	\$ 1,000.00	
Stall Expense (Reimburse Facility for Stalls)	19.00	nights \$ 15.00	\$ 285.00	
Social Event (1st Night) (i.e. dinner)	19.00	tickets \$ 15.00	\$ 285.00	
Social Event (2nd Night) (i.e. dinner)		tickets \$ -	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
				\$ 1,570.00

Cattle Head Fee (Calculate 2 head per Participant plus 5%)	38.00	head \$ 25.00	\$ 950.00	
Cattle Transportation (insert 0 if included "Cattle Head Fee" above)		head \$ -	\$ -	
Cattle Feed (insert 0 if included in "Cattle Head Fee" above)	15.00	bales \$ 10.00	\$ 150.00	
Cattle Numbers (recommend Loftrmp.com "Tyvek" numbers) (20 per set)	2.00	sets \$ 14.00	\$ 28.00	
Cattle Adhesive (recommend Rusco Livestock Tag Cement)	6.00	tubes \$ 2.50	\$ 15.00	
Shipping Cost for Cattle Numbers & Adhesive		lot \$ 15.00	\$ -	\$ 1,143.00

Clinician/Judge No. 1: NAME - ??	2.00	days \$ 500.00	\$ 1,000.00	
Travel	800.00	miles \$ 0.40	\$ 320.00	
Lodging	2.00	nights \$ 75.00	\$ 150.00	
Meals	7.00	meals \$ 15.00	\$ 105.00	
Stall(s) (No. of Horses per Night times Total Nights)	2.00	nights \$ 15.00	\$ 30.00	\$ 1,605.00

Clinician/Judge No. 2: NAME - ??	1.00	days \$ 500.00	\$ 500.00	
Travel	300.00	miles \$ 0.40	\$ 120.00	
Lodging	1.00	nights \$ 75.00	\$ 75.00	
Meals	4.00	meals \$ 15.00	\$ 60.00	
Stall(s) (No. of Horses per Night times Total Nights)	1.00	nights \$ 15.00	\$ 15.00	\$ 770.00

Clinician/Judge No. 3: NAME - ??		days \$ 400.00	\$ -	
Travel		miles \$ 0.40	\$ -	
Lodging		nights \$ 75.00	\$ -	
Meals		meals \$ 15.00	\$ -	
Stall(s) (No. of Horses per Night times Total Nights)		nights \$ 15.00	\$ -	\$ -

Clinician/Judge No. 4: NAME - ??		days \$ 350.00	\$ -	
Travel		miles \$ 0.40	\$ -	
Lodging		nights \$ 75.00	\$ -	
Meals		meals \$ 15.00	\$ -	
Stall(s) (No. of Horses per Night times Total Nights)		nights \$ 15.00	\$ -	\$ -

Rental Items	Quantity	Fee	Amount	Totals
Portable Restrooms		each \$ -	\$ -	
Trash disposal (Per Participant)		each \$ -	\$ -	
Tables & Chairs		lot \$ -	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
				\$ -

NVRHA Administration Fee (include \$20.00 per Participant)	19.00	each \$ 20.00	\$ 380.00	
NVRHA Insurance Premium (per day fee)	2.00	days \$ 80.00	\$ 160.00	
Event Manager Certificate (utilized towards a registration fee)	1.00	each \$ 200.00	\$ 200.00	
Awards and Ribbons (if competition) (calculated by # of participants)	19.00	each \$ 10.00	\$ 190.00	
Advertising/Misc. Printing Expenses	1.00	lot \$ 50.00	\$ 50.00	
Participant Good Faith Expenses (i.e. bottled water, etc.)	19.00	each \$ 2.00	\$ 38.00	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
Contingency Fee (Insert Quantity of Participants)	19.00	each \$ 20.00	\$ 380.00	\$ 1,398.00

TOTAL EXPENSES: **\$ 6,486.00**

Profit/(Loss) \$ (26.00)

NVRHA EVENT BUDGET

DATE:

EVENT NAME: Sample 3 - Day Event
 EVENT LOCATION:
 EVENT DATES:

EVENT MANAGER:
 PHONE: FAX:
 CELL PHONE:
 EMAIL:

	3 days	2 Days	1 day
RECOMMENDED PARTICIPANT FEE:	\$ 390.00	\$ 300.00	\$ 175.00

INCOME	Quantity	Fee	Amount	Totals
Participants (include \$20.00 for Registration) (3 days)	28.00	each \$ 390.00	\$ 10,920.00	
Participants (include \$20.00 for Registration) (2 days)		each \$ 300.00	\$ -	
Participants (include \$20.00 for Registration) (1 day)		each \$ 200.00	\$ -	
Stall Income (example, 4 horses, 3 nights, equals quantity of 12)	56.00	nights \$ 20.00	\$ 1,120.00	
Social Event (1st Night) (i.e. dinner)	28.00	tickets \$ 20.00	\$ 560.00	
Social Event (2nd Night) (i.e. dinner)	28.00	tickets \$ 20.00	\$ 560.00	
Other		\$ -	\$ -	
Other		\$ -	\$ -	

TOTAL INCOME: **\$ 13,160.00**

EXPENSES	Quantity	Fee	Amount	Totals
Facility Rental:	3.00	days \$ 500.00	\$ 1,500.00	
Stall Expense (Reimburse Facility for Stalls)	56.00	nights \$ 15.00	\$ 840.00	
Social Event (1st Night) (i.e. dinner)	28.00	tickets \$ 15.00	\$ 420.00	
Social Event (2nd Night) (i.e. dinner)	28.00	tickets \$ 15.00	\$ 420.00	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
				\$ 3,180.00

Cattle Head Fee (Calculate 2 head per Participant plus 5%)	56.00	head \$ 25.00	\$ 1,400.00	
Cattle Transportation (insert 0 if included "Cattle Head Fee" above)		head \$ -	\$ -	
Cattle Feed (insert 0 if included in "Cattle Head Fee" above)	17.00	bales \$ 10.00	\$ 170.00	
Cattle Numbers (recommend Loftrvp.com "Tyvek" numbers) (20 per set)	3.00	sets \$ 14.00	\$ 42.00	
Cattle Adhesive (recommend Rusco Livestock Tag Cement)	8.00	tubes \$ 2.50	\$ 20.00	
Shipping Cost for Cattle Numbers & Adhesive		lot \$ 15.00	\$ -	\$ 1,632.00

Clinician/Judge No. 1: NAME - ??	3.00	days \$ 500.00	\$ 1,500.00	
Travel	800.00	miles \$ 0.40	\$ 320.00	
Lodging	3.00	nights \$ 75.00	\$ 225.00	
Meals	10.00	meals \$ 15.00	\$ 150.00	
Stall(s) (No. of Horses per Night times Total Nights)	3.00	nights \$ 15.00	\$ 45.00	\$ 2,240.00

Clinician/Judge No. 2: NAME - ??	3.00	days \$ 500.00	\$ 1,500.00	
Travel	300.00	miles \$ 0.40	\$ 120.00	
Lodging	3.00	nights \$ 75.00	\$ 225.00	
Meals	10.00	meals \$ 15.00	\$ 150.00	
Stall(s) (No. of Horses per Night times Total Nights)	3.00	nights \$ 15.00	\$ 45.00	\$ 2,040.00

Clinician/Judge No. 3: NAME - ??	2.00	days \$ 400.00	\$ 800.00	
Travel	250.00	miles \$ 0.40	\$ 100.00	
Lodging	2.00	nights \$ 75.00	\$ 150.00	
Meals	7.00	meals \$ 15.00	\$ 105.00	
Stall(s) (No. of Horses per Night times Total Nights)	2.00	nights \$ 15.00	\$ 30.00	\$ 1,185.00

Clinician/Judge No. 4: NAME - ??	2.00	days \$ 350.00	\$ 700.00	
Travel	250.00	miles \$ 0.40	\$ 100.00	
Lodging	2.00	nights \$ 75.00	\$ 150.00	
Meals	7.00	meals \$ 15.00	\$ 105.00	
Stall(s) (No. of Horses per Night times Total Nights)	2.00	nights \$ 15.00	\$ 30.00	\$ 1,085.00

Rental Items	Quantity	Fee	Amount	Totals
Portable Restrooms		each	\$ -	
Trash disposal (Per Participant)		each	\$ -	
Tables & Chairs		lot	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
				\$ -

NVRHA Administration Fee (include \$20.00 per Participant)	28.00	each \$ 20.00	\$ 560.00	
NVRHA Insurance Premium (per day fee)	2.00	days \$ 80.00	\$ 160.00	
Event Manager Certificate (utilized towards a registration fee)	1.00	each \$ 200.00	\$ 200.00	
Awards and Ribbons (if competition) (calculated by # of participants)	28.00	each \$ 10.00	\$ 280.00	
Advertising/Misc. Printing Expenses	1.00	lot \$ 100.00	\$ 100.00	
Participant Good Faith Expenses (i.e. bottled water, etc.)	28.00	each \$ 3.00	\$ 84.00	
Other		\$ -	\$ -	
Other		\$ -	\$ -	
Contingency Fee (Insert Quantity of Participants)	28.00	each \$ 15.00	\$ 420.00	\$ 1,804.00

TOTAL EXPENSES: **\$ 13,166.00**

Profit/(Loss) \$ (6.00)