2016 WSBBA Mesquite, NV
Derby Bull Nomination
Entry Form

REQUIREMENTS FOR ENTRY:

- A COMPLETED ENTRY FORM FOR EACH BULL BEING NOMINTED.
- Current Health and Brand papers are required for check-in, including proof of ***negative TB & Brucellosis tests***.
- The following mandatory items must accompany this nomination:
  - Last payment of $400.00
- **The completed form and complete payment must be submitted together by April 1, 2016 or the entry will not be accepted. NO EXCEPTIONS.**

Event Location: Mesquite, NV

WSBBA Member #: _____ E-mail/fax for event info:_____

Owner Name: _____Owner Phone:_____

Address: _____City:_____State:_____ZIP:_____

Transporter Name: _____Transporter Phone: _____

BULL NAME:_____BULL ID (hip brand) #:_____

CHUTE DELIVERY (circle one): Left Right

Bull Rider Name:_____(If a bull rider is not name by Sunday before event, a bull rider will be drawn for this bull)

ABBI bull registration #:(optional)_____

I, as an entering bull owner, have read and understand the WSBBA guidelines. I assume all risk and danger incidental to the nature of bucking bull competitions and release WSBBA and 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 WSBBA Guidelines and stated herein.

A current Year W-9 form must be on file for the member that will receive any earnings.

Amount paid: $_____(last payment is $400, if paid other payments)

Owner Signature: _____ Date:_____

- **Name on Credit Card :** _____
- **Card Number:** _____
- **Billing Address:** _____ **City**_____ **State/Province** _____
- **Exp. Date:** _____**CSV** _____ **(back of card)** **Billing ZIP:** _____

Remit forms and payments to: **WSBBA PO Box 347 Jerome, ID 83338**
Fax: 1-866-927-2075

WSBBA
Western States Bucking Bull Association