



LONESOME PINE EQ.
14TH ANNUAL FALL BARREL DASH

SATURDAY

Payment Type:
<input type="checkbox"/> Cash
<input type="checkbox"/> Check

Name: _____ BBR#: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Youth Age (Day of Race): _____ Youth DOB: _____

Youth 12 & Under 4D \$350 ADDED

			TOTAL
Horse #1: _____	___ \$25 ___ C/O \$90		\$ _____
Horse #2: _____	___ \$25 ___ C/O \$90		\$ _____
Horse #3: _____	___ \$25 ___ C/O \$90		\$ _____
Horse #4: _____	___ \$25 ___ C/O \$90		\$ _____

OPEN 5D \$2,000 ADDED

Horse #1: _____	___ \$65	\$ _____
Horse #2: _____	___ \$65	\$ _____
Horse #3: _____	___ \$65	\$ _____
Horse #4: _____	___ \$65	\$ _____

NUMBER OF EXPOS FOR EACH PAGE

9:30am _____	12:00pm _____	Total Entry Fees:	\$ _____
10:00am _____	12:30pm _____	Office Fee:	\$ <u>20</u>
10:30am _____	1:00pm _____	Late Fee:	\$ <u>20</u>
11:00am _____	1:30pm _____	<i>(Late Fee ONLY AFTER Oct. 1st)</i>	
11:30am _____			

Total # of Exhibitions: _____	Exhibitions:	\$ _____
	(\$5/each)	
	TOTAL:	\$ _____

Signature: _____ Date: _____

I UNDERSTAND THAT I AM RESPONSIBLE FOR THE FULL AMOUNT STATED ABOVE BEFORE THE START OF THE EVENT. I FURTHER UNDERSTAND THAT A VET OR DOCTOR RELEASE IS REQUIRED FOR A REFUND SUBJECT TO ALL APPLICABLE PROCESSING FEES. I UNDERSTAND THAT ANY PAST DUE BALANCE MUST BE SETTLED BEFORE ENTERING THIS EVENT.