



Performance Horses

*All Grit, No Quit
Barrel Buckle Series*

2025 Membership Form

Each participant must show in 4 out of the 6 shows to be eligible for awards.

Name: _____

Date: _____

Address: _____

DOB: _____ (youth only)

Phone: _____

Email: _____

Horse Information: (only 1 horse/rider combo for awards program)

Horse MUST be entered by the same name at each show to count points

*Division: **must pay membership fee for each division ridden***

☐ *Open \$40*

☐ *Youth \$40*

Total Fees: _____

Exhibitor Signature (Parent or Guardian if minor) : _____

You may email forms before first show to: jecrutchfield@gmail.com

Office Use Only

Member # _____