

PAID
Open Check
Check #____
CASH
Owes:____

Riders Name:				
Horse's Name:				
Email:				
	Circle One	<u>Division</u>		
LEAD LINE	NOVICE JR.		13 YR & UNDER	
LITTLE LOPERS	MID NOVICE		14 YR - 18 YR	
WALK TROT JR.	NOVICE SR.		19 YR - 39 YR	
			40 YR & OVER	
Circle Classes of Choice				
All Day Fee: \$65 or Each Event: \$13				
BARRELS				
FLAGS				
75 UP & BACK				
POLES				
MYSTERY RACE				
OFFICE FEE (\$10):				
GRAND TOTAL:				
Signature of Rider OR Guardian: "I recognize that there are certain inheren management of this show, Latigo, any sp injury RULES & AWARD PAGE: Every Contestant must r guardian must read and understand the rules	t dangers to being aroun onsors or co-sponsors a or loss to person or pro ead the Rules and Awards page	gainst all claims, or perty at this horse s e before entering classes.	f any kind or nature that may grow out of show." If unable to understand the rules and awards page a	

November 4th December 3rd January 7th February 4th March 3rd April 7th

FOR OFFICE USE ONLY

Class Name	Add/Scratch	Paid For (Add Only)