

ENTRY FORM

DATE _____

ENTRY# _____

(PLEASE PRINT)

(CIRCLE ONE)
Youth or Adult

**** Same Number for each Rider/Horse Combination ****
SAME NUMBER IS USED THROUGHOUT THE YEAR

Rider's Name:			
Horse's Show Name:			
Rider's Street Address:			
City	State	Zip	
E-Mail:			
Area Code:	Phone Number:		

INFORMATION FROM COGGINS REPORT

Horse's Name on Coggins Report:			
Horse Owner's Name on Coggins Report:			
Horse Owners Street Address on Coggins Report:			
City	State	Zip	
Coggins Accession Lab #			
Coggins Draw Date:			

LIST CLASSES:

Jackpot:

FOR OFFICE USE ONLY	
# of Classes _____ @ \$6.00 =	\$
Minus any Jackpots	-
TOTAL DUE	\$
Pymt Information:	
<input type="checkbox"/> Cash	
<input type="checkbox"/> Check #:	