



Name: _____ Phone: _____ BBR # _____

Address: _____ City/State/Zip: _____

		Futurity \$200	Roll to Open Sat. (Fut.) \$50	Roll to Open Sun. (Fut.) \$50	Roll to Youth Sat. (Fut.) \$25	Roll to Youth Sun. (Fut.) \$25	Derby \$150	Roll to Open Sat. (Derby) \$50	Roll to Open Sun. (Derby) \$50	Roll to Youth Sat. (Derby) \$25	Roll to Youth Sun. (Derby) \$25	Open Friday \$40	Open Saturday \$50	Open Sunday \$50	Youth Friday \$20	Roll to Open Fri. (Youth) \$40	Youth Saturday \$25	Roll to Open Sat. (Youth) \$50	Youth Sunday \$25	Roll to Open Sun. (Youth) \$50
Horse 1:																				\$
Horse 2:																				\$
Horse 3:																				\$
Horse 4:																				\$

Total Entries: \$ _____
 Exhibitions: _____ X \$5 = \$ _____
 Late Fee: \$ _____
 Office Fee (Circle One): \$10/Day Or \$20/Weekend

TOTAL \$ _____

MUST BE POSTMARKED BY SEPTEMBER 19, 2025

I understand that I am solely responsible for my own actions and any accidents or mishaps that may occur to me or my horse while participating in this race.

Contestant Signature: _____ Date: _____
 (Adult signature if under 18)