CHRISTM S CA\$H Pre-Race Entry Blank

Name:	Phone		_ BBR#:
SS:	Phone	:	
Address:	~ ~ ~		
City:	State	:Zıp: _	
E-mail:			
Entry\$120 pe Horse #1: Horse #2:	tmas Ca\$h Bonus r horse (includes \$	10 ground f	fee)
			(
	eSat or Sun run		
	horse (includes \$5		
Horse #1		circle	Saturday or Sunday
Horse #3:		circle s	Saturday or Sunday
	Race: \$300 fee ge run is <u>carry over</u> C		
	Total Ent	rv Fees: \$	
(Office/Administrat	ion Fee: \$	20.00
Late Fee, afte	r Nov. 18 th , \$10 pe	r horse: \$	
,,	Tot	al Fees: \$	
injury to or the death inherit risks of equir to hold harmless all hosting facility for a	xas law, an equine pro h of a participant in eq ne activities. Further, I owners, managers and iny and all incidents or Print Name: owledge that I have	uine activities the undersig agents of rac situations wl	s resulting from the ned, do hereby agree ce production and hich may arise.
Date:	Print Name:	mad under	stand and account
the above statemen	nt.	reuu, unuers	siana, ana accepi
or Master Card Credit Card Nun Expiration Date:	ayable to CBT Pro	enience fee 	•