

# Add Form



P.O. Box 112  
Athens, TX 75751  
972-947-3113 Fax  
877-933-3277 Office

Please select what you are adding:  Horse  Incentive  Stall  RV

Rider Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Horse Name	War m-Up Race	Main Race 1		Rider Incentives						Main Race 2		Rider Incentives						Special Incentives
		Fri Night	Fri Day	Sat Day	\$20			\$10			Sat Night	Sun Day	\$20			\$10		
Youth 1-18	Adult 19-49				Sr. 50+	Yg. Chmps 8 & under	Youth 1-18	Adult 19-49	Sr. 50+	Yg. Chmps 8 & under			Consistency					
If you do not a name in the space below, a \$10 change fee per horse will be assessed. Please use registered name if horse has one.																		
#1:				F							F							
#2:				U							U							
#3:				L							L							
#4:				L							L							
#5:																		

<p align="center"><b>ENTRY CHARGES</b></p> <p>Main Race Entries           X \$75 =</p> <p>Rider Incentives            X \$20 =</p> <p>Special Incentives         X \$20 =</p> <p>Young Champions           X \$10 =</p> <p>Warm-Up Race Entries      X \$50 =</p> <p align="right"><b>Total Entry Charges \$</b></p>	<p align="center"><b>STALLS</b></p> <p align="center">Buy on site</p>	<p align="center"><b>RVs</b></p> <p align="center">Buy on site</p>
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<p><b>Entry + Stalls + RVs = TOTAL CHARGES:</b> _____</p> <p><input type="checkbox"/> Check here is billing address same as above</p> <p>Name: _____</p> <p>Billing Address: _____</p> <p>City, St, ZIP: _____</p>	<p>Credit Card:    Visa    MasterCard    Discover    Amex</p> <p>Credit Card Number</p> <p>_____</p> <p>Expiration Date: _____    CVV Code: _____</p> <p>Card Holder's Signature: _____</p>
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INDEMNIFICATION AND RELEASE PERSONAL INJURY: By signing this document and/or making entry as a participant, I hereby understand that no matter how careful the sponsors, offices, directors, or participants may be, my injury or death, as well as that of my horse, or my child is a possibility. And furthermore, I, as a participant (or parent/guardian of a participant) agree to hold harmless Elite Barrel Racing, LLC and the Somervell County Expo Center, its agents, management, contractors, and employees from any expense, cause of action, damage, or claim of damage (including legal fees) of any kind whatsoever, which I might assert as a result of my (or my child's) injury, death or claim. I also understand that all contestants and horses will be photographed and videoed and it is the sole property of Elite Barrel Racing, LLC. AGE CERTIFICATION – By the appearance of my signature as indicated below, I certify that I am 18 years of age or older, or that I am the parent or legal guardian of the participant/entrant who is under the age of 18. I further certify that I have available at the request of even management, a current NEGATIVE EIA TEST CHART on each animal I have on the event grounds. I understand that if State and/or Local Authorities require presentation of said test chart at this event and I cannot present a NEGATIVE EIA TEST CHART for any or all animals, I will be personally responsible for any fines and will be responsible for any fines levied on the event producer. Elite Barrel Racing will add your email address to our mailing list and that of our national sponsors. If you wish to opt-out, you may do so using the link contained in the communication in question or by contacting us with your name and email address.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_