

# Triple Turn Classic Pre-Entry Form

**Entries due APRIL 12, 2010**

**Name:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

**NWBRA #** \_\_\_\_\_

**NBHA Dist 03 #** \_\_\_\_\_ **(1<sup>st</sup> run sanctioned ONLY)**

**WPRA #** \_\_\_\_\_

Exhibitions will be run on a ticket format and are \$5.00 each.  
 You can pre-enter exhibitions or buy them the day of the event.  
 If you pre-enter your exhibitions, make sure and pick up your tickets at the main office.  
 You cannot exhibition without a ticket!  
 \*\*\*A limited amount of tickets will be sold. Exhibitions must be completed by 10:30a.m. \*\*\*

Please list your horses in the order you prefer to run them:

Horse Name <small>(**we encourage you to use your horse's registered name for Equi-Stat purposes)</small>	\$600 added <b>Open 4D Run #1</b>	\$600 added <b>Open 4D Run #2</b>	<b>Senior (50 and over)</b>	<b>Youth (15 and under)</b>	<b>Pee Wee (6 and under)</b>	<b>Total</b>
	<b>\$40</b>	<b>\$40</b>	<b>\$25</b>	<b>\$15</b>	<b>\$10</b>	
<b>Horse #1</b>			c/o yes - no	c/o yes - no	c/o yes - no	
<b>Horse #2</b>			c/o yes - no	c/o yes - no	c/o yes - no	
<b>Horse #3</b>			c/o yes - no	c/o yes - no	c/o yes - no	
<b>Total Exhibitions \$5 each</b>	*****	*****	*****	*****	*****	
<b>One time arena/office fee \$10 (excludes Youth &amp; Pee Wee)</b>	*****	*****	*****	<b>n/a</b>	<b>n/a</b>	
<b>Late Entry Fee \$20 (per RIDER after April 12, 2010) Excludes Youth &amp; Pee Wee</b>	*****	*****	*****	<b>n/a</b>	<b>n/a</b>	
<b>GRAND TOTAL:</b>	*****	*****	*****	*****	*****	

In submitting my entry, I hereby release the Triple Turn Classic organizers from any claim or write up damages which may occur to me, my horse, my child or other property at the All Seasons Arena and Bowman County Fairgrounds. I realize there are certain risks in any sport, and I take full responsibility for myself and/or my child if an incident should occur it is also understood that by signing this entry, I have read, understood, and agree to abide by all the rules.

Contestant's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian if contestant is a minor \_\_\_\_\_ Date \_\_\_\_\_

RETURN FORM AND PAYMENT TO: **ALI MILLER – 14710 98<sup>th</sup> St SW – Bowman, ND 58623**