

FRI _____

TEXAS EXTREME BARREL CLASSIC



JAN 4 TH
FRIDAY ENTRY



RIDER: _____

HORSE NAME _____

ADDRESS: _____ PHONE # _____

CITY: _____ ZIP _____ SSN# _____

REQUIRED Coggins: _____

Email Address: _____ In submitting my entry, I hereby release the show producer or any employee, volunteer or agent of WrapN3 from any claim or right for damages which I may incur while participating in the event or while on the grounds of said event to include loss of property, life or injury. I also certify that I have in my possession a current & certified coggins for the above named horse. My signature is an acknowledgment of the above rules, WrapN3 event rules and that I agree to participate at my own risk to self and horse.

Signature: _____

Must Be Signed By Contestant or Parent/Guardian For Minors Date

Open Warm Up Race \$40 _____

\$5 OFFICE CHARGE INCLUDED

MAKE CHECKS PAYABLE TO WRAPN3 P. O. BOX 1625 THREE RIVERS, TX 78071

CC PAYMENTS TAKEN WITH 4.5% SERVICE CHARGE # _____

EXP DATE ___ / ___ CODE ON THE BACK _____

BILLING ZIP CODE _____

NO PAYMENT WILL BE AWARDED WITHOUT A CURRENT W9 FORM ON FILE. THEY ARE LOCATED AT WRAPN3.COM.