

\_\_\_\_\_ SAT

# TEXAS EXTREME BARREL CLASSIC



## SATURDAY ONLY Jan 5TH



RIDER: \_\_\_\_\_ PESI STALLION INC \_\_\_\_ YES  
PLEASE PRINT SO WE CAN READ IT

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

HORSE NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE # \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ 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 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 \$50 = \$ \_\_\_\_\_ 50 \_\_\_\_\_  
(INCLUDES \$5 OFFICE CHARGE) Age As Of Jan 1  
3D AGE Incentive Race \$25 \_\_\_\_\_ Youth 18 & Under  
\$25 \_\_\_\_\_ Adult 19-49  
\$25 \_\_\_\_\_ Senior 50 & Over  
DERBY SIDEPOT \$50 \_\_\_\_\_

Total \$ \_\_\_\_\_

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.