

1ST PAYMENT COUPON \$100**LATE FEE OF \$15 IF POSTMARKED AFTER 04/01/2019**

RIDER NAME:

PHONE:

EMAIL:

ADDRESS:

CITY, STATE, ZIP

HORSE:

SEX: S G M

YEAR FOALD:

NAME OF OWNER:

PHONE:

ADDRESS:

2ND PAYMENT COUPON \$100**LATE FEE OF \$15 IF POSTMARKED AFTER 05/01/2019**

RIDER NAME:

HORSE:

NAME OF OWNER:

\$100

STALL @ \$15 NIGHTLY MAX \$55:

SHAVINGS @ \$10 EACH-MUST BUY 1

\$10

EXTRA SHAVINGS @ \$10 EACH

OF TIME ONLYS @ \$3EACH

C/O TO OPEN 5D \$65 EACH DAY

SATURDAY

SUNDAY

C/O TO INCENTIVE

TOTAL AMOUNT ENCLOSED