THIS FORM MUST BE COMPLETELY FILLED OUT TO PROCESS YOUR ENTRY All online entries must be sent by 4:30

When you click the Red link to submit your online entry form you see this page. Below you will find all of the details we must have to process your entry.

your energi		The Class number	Regist	tration		Required to pu	ıll			
		your horse will be	numb	er here,		horses onto th	e Cost of the	e class		
		entering, if more	you m	nust have	2	grounds	you are er	ntering		
		than one class use	this n	umber to)	,				
Full Registered		next box	enter	/						
Name of your				/						
Horse			/							
						tion Online Entr	•			
		All in	formation	must k	e co	proplete and subm	ited by 4:30 pm.			
	Back	Name Of Horse	Registration	Coggins	Entry		Trainer's Name	Owner's		
	Number	Class Numbers	Number	& Date	Fee	and Complete Address	and Complete Address	and Complet	e Address	This information
	\rightarrow		v						\leftarrow	MUST be
As per the USDA each horse			-			Member # :	Member # :	Member # :		
will need a separate Back							Wender #	Weinder # .		COMPLETELY filled out
number. The back number									<	for each horse you are
no longer is assigned to one						Member # :	Member # :	Member # :	<	entering (even if the
rider, the rider will need to		I								information is the
change their back number									<	same as previous
each time they ride a			1			Member # :	Member # :	Member # :	<	·
different horse. The entry			1							horse)
office will assign each horse									+	We need complete
a back number that is						Member # :	Member # :	Member # :	\leftarrow	·
available.									/	names and COMPLETE
Back numbers must be	\rightarrow									addresses
picked up before entry	- -					Member # :	Member # :	Member # :	\leftarrow	
office closes.	Must he signe	d by an Exhibitor or Agent: I, the undersign	ed on my own hehalf a			N MUST BE COMPLETED)	or annarent, enter the above name hor	ses subject to all the rules	and	And Correct Member
	regulations of	the show and of any organization with who r reputation or any claim of any type for los	om the show is affiliated	d. I/We hereby	waive all	claims against the Racking Horse Breede	rs Association of any type whatsoever, v	whether the same be for d	amages, loss,	Number
	that may arise	from exclusion of any horse from showing we any claims arising out of errors involving	because of compliance	or attempted	compliant	ce with any State or Federal law, any regi	ulations there under, or any regulations	issued by any affiliating or	ganization.	
		(ALL	CHARGES & V	VINNING	S WILL	L BE CHARGED/CREDITE	ED TO THIS PERSON)			Full Credit Card Number
	1	Member #:					-			Here (we can only accept
		Name:					Method of Payment:		<	MasterCard or Visa)
All information must be		Address:								
filled out to accept entry —	\longrightarrow						Total Amount Due:			Your total cost all classes
		Phone:								entered.
				•			1			

Send your entries to: Entry@rackinghorse.com

When you submit your form request a read receipt (found in the options category of your email) from our server confirming that we do have your form, please print the read receipt for your files to verify that we did receive your entry. (You will need to bring this read receipt to the show with you)