

OPHB/TRIPLE CROWN FUTURITIES

Weanling Futurity Non Pro - Albany, OR October 8, 9, &10, 2010

Colt/Gelding _____ Filly _____ Birth Date _____
1st Payment \$30 Due July 1, 2010 - double if late/no refunds

HORSES NAME _____ REG # _____

SIRE: _____ DAM: _____

OWNER: _____ PHONE _____

ADDRESS _____ CITY: _____ STATE: _____ ZIP: _____

I hereby agree to abide by the Rules & Regulations of the Oregon Paint Horse Breeders Inc. OREGON PAINT HORSE BREEDERS & TRIPLE CROWN FUTURITIES will not be responsible for any accident and/or injury that may occur to any exhibitor, equipment or horse. Signing of this form waives any and all future claims against Oregon Paint Horse Breeders In., Triple Crown Futurities and the Management of any of their sponsored futurities. It is understood that I will not be able to participate in any of the futurities unless this form is SIGNED AND DATED. *I further understand that OPHB/TCF may be drug testing at these futurities and as a condition of signing this form agree to the rules and regulations of this organization.*

Signature of Owner _____ Social Security Number (mandatory) _____ Date _____

Mail to: OPHB/TCF - PO BOX 1258, LONG BEACH, WA 98631

Detach here: Weanling Futurity Non Pro October 8, 9 & 10, 2010, Albany, OR

Colt/Gelding _____ Filly _____ Birth Date _____
2nd Payment \$30 Due Aug. 1, 2010 double if late/no refunds

HORSES NAME & REG # _____

SIRE: _____ DAM: _____

OWNERS NAME: _____

Mail to: OPHB/TCF - PO BOX 1258 - LONG BEACH, WA 98631

Detach here: Weanling Futurity Non Pro October 8, 9, 10, 2010 Albany OR

Colt/Gelding _____ Filly _____ Birth Date _____
3rd Payment \$65 Due Sept. 1, 2010 double if late/no refunds

HORSES NAME & REG # _____

SIRE: _____ DAM: _____

OWNERS NAME: _____

Mail to: OPHB/TCF - PO Box 1258 - Long Beach, WA 98631

