



JURASSIC CLASSIC BARREL RACE

SOMERVELL COUNTY EXPO CENTER

GLEN ROSE, TX

FEB. 25 - FEB. 28, 2010

\$2500 ADDED CASH SADDLES & PRIZES IN EACH D

POSTMARK BY 2/13/10 FOR NO LATE FEE

ENTRY FORM: (must be postmarked by Feb.13, 2010 for no late fee)

Rider: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Cell: _____

E Mail: _____

SSN#: _____ DOB: _____

SD Open Entry: Check the days you want to run. Please check time choices for Sat/Sun: SAT: 10 AM 2 PM 6 PM SUN: 10 AM 2PM -END

REGISTERED Horse's Name: \$35 Entry Fee \$70 Entry Fee (covers Sat & Sun) \$45 Entry Fee for 1 Day Only

_____	<input type="checkbox"/> Fri 6:00 pm	<input type="checkbox"/> Sat 10:00 am	<input type="checkbox"/> Sun 10:00 AM
_____	<input type="checkbox"/> Fri 6:00 pm	<input type="checkbox"/> Sat 10:00 am	<input type="checkbox"/> Sun 10:00 AM
_____	<input type="checkbox"/> Fri 6:00 pm	<input type="checkbox"/> Sat 10:00 am	<input type="checkbox"/> Sun 10:00 AM

If sections do not fill, you will not be moved up earlier!

4D Incentive Race Entries: Check 1 box for each day you want to enter the incentive race. \$25 EF/Day Age as of 1/1/10

REGISTERED Horse's Name:	YOUTH (15 Yrs. & Under)	ADULT (16-49 Yrs.)	SENIOR (50 yrs. & over)
_____	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun
_____	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	<input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun

PEEWEE 2D : Horse's Reg. Name _____ Sat Sun _____ Sat Sun

TOTAL ENTRIES: _____ X \$70 = _____

TOTAL FRIDAY ENTRIES: _____ X \$35 = _____

TOTAL ONE DAY ONLY OPEN ENTRIES (Sat/Sun) _____ X \$45 = _____

TOTAL INCENTIVE RACE ENTRIES PER DAY: _____ X \$25 = _____

TOTAL STALL FEES: \$35 after 2/13/10 _____ X \$25 = _____

TOTAL SHAVINGS (one bag required): _____ X \$ 7.50 = _____

Number of Stalls:

Stalls _____ @ \$25

Shavings _____ @ \$7.50

Mats limited # _____ @ \$15.00

Stalls are rented for Thurs-Sun for one low price. No one day fee. After 2/13/10, stalls will be \$35. If you want to stall together, you MUST note so and send in entries together.

Mail to: Expo Center-Jurassic

P. O. Box 8

Glen Rose, TX 76043

For RV spaces, call to reserve w/ Credit card. 254-897-4509. Limited number

TOTAL OFFICE CHARGE ONCE/PERSON: _____ X \$15 = _____ \$15

LATE FEE (ONE TIME PER CLASS - not per day!) _____ X \$10= _____

TOTAL IF PAID BY CASH/CHECK

Credit card: Name on card (print): _____ Type: Visa or MC Acct Number: _____
Exp Date: _____ Billing Zip Code: _____ Card

Holder Signature: _____

Call Expo Center days at 254-897-4509 for info or Stacy Jerrett 254-965-3623 nights (5-9) . Email: Cheri - @somesxpo3@glenrose.org or stacy_jerrett@yahoo.com MAKE CHECKS PAYABLE TO: EXPO CENTER

Indemnification & Release: Personal Injury. By signing this document, and making entry as a participant I hereby understand that injury to myself is a possibility no matter how careful the sponsors, directors or participants may be. Furthermore, I as participant (or parent/guardian) agree to hold harmless Stacy Jerrett, Michael Dooly, Somervell County, or its officers, agents, management contractor or employees, from any expense, cause of action, damage or claim of damage, including legal fees of any kind whatsoever which I might assert which might result as a result of my or my child's injury, death or claim. Property Loss or Injury: I further agree to hold harmless the above mentioned parties for any injury or death of any animal and/or loss. Disappearance, theft or damage to any property which is or upon the premises of the Somervell County Expo Center. I also understand that any video or photography shot of me is the sole property of the videographer or photographer and its owners. If I do not to be videoed or photographed, I must inform both the videographer and photographer before my race. Age Certification: By the appearance of my signature indicated below, I certify that I am 18 years of age or older or that I am the parent/guardian of the participant who is under the age of 18.

Signature: _____ Printed name: _____ Date: _____