## May 6-13, 2024 Aged Event Entry Form





## **DERBY**

A COPY OF THE REGISTRATION PAPERS, OWNER / RIDER NRCHA MEMBERSHIP CARDS MUST BE INCLUDED WITH THIS ENTRY Send to Gay Lenz – 11587 Hunt Lane, Guthrie, OK 73044 Phone (405) 818-7556, Fax (405) 730-8050 email: entry@srcha.org

Make Checks Payable to: SRCHA Credit Cards Accepted 5% charge

Mark Here	Deadline 25% late fee if NOT received by April 17			Add Back Jackpot	Entry Fee	NRCHA Fee	Video	Cattle Fee	Total	Total Due
	OD	Open Derby	Added \$50,000	\$1,465	\$750	\$10	\$25	\$250	\$2,500	
	IOD	Intermediate Open Derby	Enter if eligible, must enter the open			\$10			\$10	
	LOD	Limited Open Derby				\$10			\$10	
	L10D	Level One Limited Open Derby	Jackpot Only	\$315	\$150	\$10	\$25	\$250	\$750	
	NPD	Non Pro Derby		\$265	\$50	\$10	\$25	\$250	\$600	
	INPD	Intermediate NP Derby (Enter if elgible)	You can enter all that you are eligible for			\$10			\$10	
	LNPD	Limited NP Derby (Formerly Novice)	but pay only one cattle/video fee. Each division is jackpot only No added			\$10			\$10	
	L1NPD	Level 1 NP Derby (Formerly Amt)	money. Int. & Ltd must enter NP Derby Jackpot Only	\$150	\$50	\$10	\$25	\$250	\$485	
	NPBXD	Non Pro Boxing Derby		\$150	\$50	\$10	\$25	\$250	\$485	
	L1NPBD	Level 1 NP Boxing ** Must Enter NPBXD		\$150	\$50	\$10			\$210	
	OBS	Open Bridle Spectacular	Payout for Spectaculars is per NRCHA	\$615	\$100	\$10	\$25	\$250	\$1,000	
	OTRS	Open Two Rein Spectacular	Payout out schedule	\$615	\$100	\$10	\$25	\$250	\$1,000	
	NPS	Non Pro Bridle Spectacular		\$165	\$100	\$10	\$25	\$250	\$550	
	NPTRS	Non Pro Two Rein Spectacular		\$165	\$100	\$10	\$25	\$250	\$550	
	NPLS	Non Pro Limited Spectacular (Boxing)		\$165	\$100	\$10	\$25	\$250	\$550	
volunte	ers, clients have read	TIES. I agree that I will not hold NRCHA, S, or participants liable for any injury or propithis release and understand its terms.  IGN Signature (Exhibitor/Agent/Owner/parent or Go	nerty damage risking out of or caused by the state of the			Late fe	e 25% (	of entry	TOTAL	
		NOTE: Cross-entering. When cross entering	AQHA#						_	
Owner	's Name		(phone#)		NRCI	HA# _				
Addres	s		City		State	<b>Zi</b> j	р			
Rider's	Name NRCHA #									
	(phone#)									
Addres	s.		City			State	7in			
Audies	CityStateZip  MUST HAVE PAYEE TO RECEIVE ANY PAYOUT									
		PAYEEOwnerRider SS#								

IF PAYING WITH CREDIT CARD YOU MUST FILL OUT CREDIT CARD FORM