

Generic Payment Form

PLEASE PRINT

NAME OF HORSE	GAIT	SEX*	AGE	SIRE	DAM

* Use C, F or G to indicate sex.

Name of Race	Amount	Name of Race	Amount
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
Total (U.S. FUNDS ONLY)			\$ _____

NOTE: To get the most value from use of this form, use the duplicating system described below. This eliminates the need for writing out your name and address for every payment that you make.

1. Type in the Owner's or Agent's name and address and the name, etc. of horse to be staked.
2. Have enough copies of these partially completed forms made by a copying machine so that you will have one for each horse.

Please Type or Print
 NOMINATOR _____
 OWNER _____
 STREET _____
 CITY, STATE & ZIP _____
 PHONE () _____
 FAX () _____
 E-MAIL _____