

2019 RFDTV'S AMERICAN ALL-GIRL ENTRY

FRIDAY, MARCH 1, 2019- 9AM

OPEN W/ #9 INC

\$20,000 GUARANTEED TO AVG CHAMPIONS

\$5000 GUARANTEED TO INC CHAMPIONS



ENTRY GUIDELINES:

*\$300 PER ROPER, ENTER 4X(MAY DRAW 2), 4 HD P.A.1, WPRA APPROVED

*NO CAPS, NO AGE LIMIT

*BOOKS OPEN DEC 1-FEB 15, \$300 ROPER

*CURRENT COGGINS AND HEALTH PAPERS REQUIRED

*MUST BE CURRENT ROPE METRICS MEMBER, MEMBERSHIPS AVAILABLE ON SITE OR MAIL WITH ENTRY ON SEPARATE PAYMENT

PLEASE COMPLETE A SEPARATE ENTRY FOR EACH DIVISION YOU ENTER

HEADER NAME: _____	ID# _____	CLASSIFICATION# _____
DATE OF BIRTH _____	CELL PHONE # _____	ALTERNATE PHONE # _____
ADDRESS _____	CITY _____	STATE _____ ZIP _____
EMAIL _____		
AMOUNT PAID \$300 <input type="checkbox"/> CHECK # _____ <input type="checkbox"/> CASH _____ <input type="checkbox"/> CREDIT	FOR OFFICE USE ONLY: DATE PROCESSED _____	

HEELER NAME: _____	ID# _____	CLASSIFICATION# _____
DATE OF BIRTH _____	CELL PHONE # _____	ALTERNATE PHONE # _____
ADDRESS _____	CITY _____	STATE _____ ZIP _____
EMAIL _____		
AMOUNT PAID \$300 <input type="checkbox"/> CHECK # _____ <input type="checkbox"/> CASH _____ <input type="checkbox"/> CREDIT	FOR OFFICE USE ONLY: DATE PROCESSED _____	

CREDIT CARD PAYMENT: 4% FEE FOR CREDIT CARD ENTRIES **VISA** **MC** **DISC** **AMEX**

ACCT # _____ **EXP. DATE** _____ **3 OR 4 DIGIT CVS** _____

NAME OF CARDHOLDER _____ **PHONE #** _____

ADDRESS OF CARDHOLDER _____ **CITY** _____ **STATE** _____ **ZIP** _____

AMOUNT CHARGED \$ _____ **(INCLUDE 4% CONV. FEE) AUTHORIZATION SIGNATURE** _____

By returning this form and making nomination into the Patriot Finale, I acknowledge that my partners and I have read and voluntarily agree to the release and waiver of liability and indemnity agreement found on The Patriot website and on the back of this form.

MAKE CHECKS PAYABLE TO THE PATRIOT & MAIL TO: P.O. Box 355 / Rogersville, MO 65742

OFFICE: 417-547-3406 OR 417-350-1252 / EMAIL: INFO@AMERICANPATRIOTEVENT.COM/ WEBSITE: AMERICANPATRIOTEVENT.COM