

**OKRHA
Ride And Slide
March 4-9, 2025**

BACK # _____

NAME OF PERSON RESPONSIBLE FOR THIS HORSE'S FEES:															
Please send earnings (if applicable) to: Owner Trainer If not owner then SS# of trainer															
NAME OF GROUP FOR STALLS:															
HORSE INFORMATION - as it appears on NRHA COMPETITION LICENSE - complete one entry per horse															
REGISTRATION NAME:						NRHA COM LIC #									
SEX: M G S			FOAL YEAR			TRAINER:									
OWNER INFORMATION - as it appears on NRHA COMPETITION LICENSE - SS# or Tax ID must be on file to receive payout checks															
NAME:						NRHA #			EXP DATE						
PHONE NUMBER:						SS#/TAX ID:									
ADDRESS:						CITY/STATE/ZIP:									
EMERGENCY CONTACT:						PHONE #:			RELATIONSHIP:						
EXHIBITOR INFORMATION (date of birth required for PRIME TIME and YOUTH CLASSES)															
#1 NAME				DOB				#2 NAME				DOB			
NRHA #				Expires				NRHA #				Expires			
CARD TYPE: Pro Non Pro Associate(green riders only)				CARD TYPE: Pro Non Pro Associate(green riders only)				CARD TYPE: Pro Non Pro Associate(green riders only)				CARD TYPE: Pro Non Pro Associate(green riders only)			
Relationship to Owner:						Relationship to owner:									
CLASS NUMBERS						CLASS NUMBERS									
_____ I HAVE READ AND UNDERSTAND THE SHOW RULES & LIABILITY INFO Print Name _____ Signature _____ Date _____						ADDITIONAL FEES: PHOTO FEE: \$10.00 NRHA DRUG FEE: \$35.00 VIDEO FEE per run \$20.00 OFFICE FEE: \$30.00 LATE FEE: see terms and conditions \$ Misc \$									
include a copy of OWNER'S & EXHIBITOR'S Current NRHA CARDS _____ and copy of HORSE'S NRHA COMPETITION LICENSE (for NRHA CLASSES) _____						STALLS- please use stabling request form 									
ENTER ONLINE AT OKRHA.COM OR EMAIL THIS FORM TO KATHY.SADDLEUP@GMAIL.COM SNAIL MAIL- SADDLE UP ENTERPRISES 36970 COKER RD- ASHER, OK 74826															