



Lucchese Race for the Cash III
August 30 - September 1, 2008
Waco, Texas



Phone: (903) 677-1213
 Fax: (432) 224-1222

Add Form

Fill out the sections below to add a horse, incentive, stall, or RV.

Please circle what you are adding: Horse, Incentive, Stall, RV

Rider Name: _____ Phone: _____

Name of Horse

Rider Incentive Races
The Rider Incentive is Optional
 Young Adult Senior
 (18 yrs & under) (19-49) (50 & Over)

New Incentive Races
(check incentive to add)
 8 & Under Big Bucks Your Entry
 (free) (18 & Over) Fees Are Paid

State Incentive Races
Based on State of Residence
 TX OK Other

Main Race

- Saturday Day Horse #1: _____
- Sunday Day Horse #2: _____
- Sunday Night Horse #3: _____
- Monday Day Horse #4: _____
- Horse #5: _____

| | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <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"/> |
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Warm-Up Race

- Saturday Night Horse #1: _____
- Horse #2: _____
- Horse #3: _____
- Horse #4: _____
- Horse #5: _____

There is no charge to enter the 8 & Under Incentive

Stalls and RVs

Entry Totals

Number of Stalls Requested
 Friday _____ x \$20 = _____
 Saturday _____ x \$20 = _____
 Sunday _____ x \$20 = _____

Number of RV's
 Friday _____ x \$25 = _____
 Saturday _____ x \$25 = _____
 Sunday _____ x \$25 = _____

Stall Charge: _____

RV Charge: _____

Total Entries: _____ x \$120 = _____
 Warm-Up Entry _____ x \$60 = _____
 Rider Incentive Entry: _____ x \$20 = _____
 Stalls _____ x \$20 = _____
 RVs _____ x \$25 = _____
 Entry Charge: _____

Credit Card Information

Credit Card: Visa Mastercard Discover AMX
 Credit Card Number

Exp Date:

Billing Address on Credit Card

For Office Use Only

Date Paid: _____

Payment Method: _____

Check #: _____

Amount: _____