

**ANNUAL GREG OLSON MEMORIAL 5D BARREL RACE • January 15-16, 2022 | Buckeye, AZ**



Last Name \_\_\_\_\_ First Name \_\_\_\_\_ BRN4D# \_\_\_\_\_  
 Address \_\_\_\_\_ WPRA# \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ SS# \_\_\_\_\_

Co Sanctioned WPRA, PESI  
 ACBRA, TRIPLE 7

the boxes of the races that you are going to run in  
 the RO box you want your open time to roll over to

**Please use horse's Registered Name**

Horse #	OPEN SAT. \$ 7,500 added	Roll from Sat. Futurity	Roll from Sat. Derby	OPEN SUN. \$7,500 added	Roll from Sun. Futurity	Roll from Sun. Derby	YOUTH SAT. \$100 added	YOUTH SUN. \$100 added	SENIOR SAT. \$100 added	SENIOR SUN. \$100 added	NOVICE SAT. \$100 added	NOVICE SUN. \$100 added	Entries <i>MUST</i> be postmarked by Monday Dec. 20 <b>TOTAL</b>
Horse #1	\$75			\$75			\$45 RO	\$45 RO	\$45 RO	\$45 RO	\$45 RO	\$45 RO	
Horse #2													
Horse #3													
Horse #4													

**Stalls/Pens**

Please fill out stall form at  
 brn4d.com  
 For RV hook-ups call South Buckeye  
 Equestrian Center @ 623.691.6900

Mail to: **BRN4D**  
**13159 S. Leland Rd • Oregon City, OR 97045**  
 EMERGENCY # 541.993.2929 or 503.572.8093

**Location:**  
 S. Buckeye Equestrian Center  
 10300 S. Miller Rd.  
 Buckeye, AZ 85328

**For more information call 503.656.8181 or email nancy@brn4d.com**  
 Draw will be posted by Thursday Jan. 13 @ 7p.m. @ brn4d.com  
**Payment must accompany entry or late fee will be assessed. NO REFUNDS.**  
**Postmarked by Monday Dec. 20 Fax Credit Card Entry to 503.656.8180**

ABOVE FEE TOTAL	\$ _____
OFFICE FEE - \$12 per horse/per day	\$ _____
LATE FEE - \$15 per day/\$25 per weekend	\$ _____
STALLS/PENS - Total from stall/pen form	\$ _____
ACBRA   \$5 per horse per race	\$ _____
Triple 7   \$5 per horse per race	\$ _____
<i>SUBTOTAL</i>	\$ _____
VISA/MC Fee - 5%	\$ _____
<b>TOTAL FEES</b>	<b>\$ _____</b>

Name \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Visa/Master/Discover Card# \_\_\_\_\_ CVV Code # \_\_\_\_\_  
 Address of card holder \_\_\_\_\_