

EG BUCKING BULL GAMES ENTRY FORM

BULL OWNER INFORMATION

Name:		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Tax ID Number:	Phone #:	Email:

EVENT INFORMATION

EVENT NAME / LOCATION: _____ EVENT DATE: _____

CT Champ Class Futurity _____ CT Underdog Class Futurity _____ CT Experience Class Futurity _____

CT Finale Champ Class _____ CT Finale Underdog Class _____

World Series Futurity _____ NBBB Champ Class Futurity _____ NBBB Underdog Class Futurity _____

3 yr old Budro _____ Bull & Rider Tournament _____ EFL Team Futurity _____

BULL INFORMATION

1. Bull Brand / ID:	Bull Name:	Delivery: Left <input type="checkbox"/> Right <input type="checkbox"/>
Bull Date of Birth:	Description:	ABBI Registration #:
2. Bull Brand / ID:	Bull Name:	Delivery: Left <input type="checkbox"/> Right <input type="checkbox"/>
Bull Date of Birth:	Description:	ABBI Registration #:
3. Bull Brand / ID:	Bull Name:	Delivery: Left <input type="checkbox"/> Right <input type="checkbox"/>
Bull Date of Birth:	Description:	ABBI Registration #:

BILLING INFORMATION

Champ Class \$1010.00 Underdog Class \$810.00 Experience Class \$260.00

CT Finale Champ Class \$2510.00 CT Finale Underdog Class \$1010.00

World Series Futurity \$1500.00 NBBB Champ Class Futurity \$2600.00 NBBB Underdog Class \$1600.00

3 yr old Budro \$2010.00 Bull & Rider Tournament \$2010.00 EFL Team Futurity \$2510.00

Payments will be made in the form of Check, Cashier Check or Credit Card (MasterCard, Visa and American Express are accepted) 5% Charge Added To Credit Cards

Credit Card Number:	Security Code:	
Billing Address:	Expiration Date:	
State:	ZIP Code:	Check #:

BULL HAULER/ TRAINER INFORMATION

Name:		
Phone:	Cell:	Email:

SIGNATURES

I authorize the verification of the information provided on this form. All information is accurate to my knowledge.

Signature of applicant:	Date:
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