

1. Owner:	2. Owner
SSN: <span style="float: right;">not required if on file</span>	SSN: <span style="float: right;">not required if on file</span>
Address:	Address:
City/State/Zip	City/State/Zip
Phone: (    )	Phone: (    )
E-Mail:	E-Mail:

**SHOW ENTRIES** COPY OF REGISTRATION PAPERS IS REQUIRED ON ALL NEW ENTRIES

3 Yr. Old: Name \_\_\_\_\_ Reg. No. \_\_\_\_\_ Payment \_\_\_\_\_  
 (Fee & deadlines: \$760 postmarked by March 1 of the show year  
 \$800 postmarked by June 1 of the show year  
 \$900 postmarked by August 1 of the show year

4 Yr. Old: Name \_\_\_\_\_ Reg. No. \_\_\_\_\_ Payment \_\_\_\_\_  
 (Fee & deadlines: \$260 postmarked by March 1 of the show year  
 \$300 postmarked by June 1 of the show year  
 \$400 postmarked by August 1 of the show year

5 Yrs. & Over: Name \_\_\_\_\_ Reg. No. \_\_\_\_\_ Payment \_\_\_\_\_  
 (Fee & deadlines: \$260 postmarked by March 1 of the show year  
 \$300 postmarked by June 1 of the show year  
 \$400 postmarked by August 1 of the show year

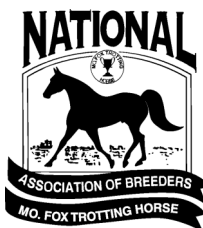
Specialty, 4 & Over: Name \_\_\_\_\_ Reg. No. \_\_\_\_\_ Payment \_\_\_\_\_  
 (Fee & deadlines: \$260 postmarked by March 1 of the show year  
 \$300 postmarked by June 1 of the show year  
 \$400 postmarked by August 1 of the show year

**NOTE: Horses may be entered in both the Specialty 4 & Over and the 4 Yr Old or 5 Yrs & Over divisions.**

Use additional entry forms for multiple entries

NAB MEMBERSHIP FEE (\$30.00 per year) \_\_\_\_\_

TOTAL ENCLOSED \_\_\_\_\_



**Mail to: National Breeders Cup, P. O. Box 3193, Springfield, MO 65808**