

SOUTHEAST TEXAS BARREL RACING ASSOCIATION

2021 NOVICE HORSE NOMINATION

I hereby declare the below named horse(s) to be a novice horse with earnings of the amount shown, and is eligible to compete in STBRA Novice Horse classes. I agree to abide by all STBRA rules. **For points to count in Novice Classes, the \$20 Nominated Fee must be paid on each Novice Horse for EACH event. For All Around: The nominated horse must compete in at least half of the jackpots in both Novice Barrels and Novice Poles.**

NAME OF OWNER: _____

BARN NAME OF HORSE: _____

REGISTERED NAME OF HORSE: _____

LIFETIME EARNINGS IN BARREL RACING: \$ _____ Nomination \$ _____

LIFETIME EARNINGS IN POLE BENDING: \$ _____ Nomination \$ _____

ALL AROUND: Nomination\$ _____

SUB TOTAL \$ _____

**** *LIST ALL PREVIOUS OWNERS ON THE BACK OF THIS PAGE* ******

.....

NAME OF OWNER: _____

BARN NAME OF HORSE: _____

REGISTERED NAME OF HORSE: _____

LIFETIME EARNINGS IN BARREL RACING: \$ _____ Nomination \$ _____

LIFETIME EARNINGS IN POLE BENDING: \$ _____ Nomination \$ _____

ALL AROUND: Nomination\$ _____

SUB TOTAL \$ _____

**** *LIST ALL PREVIOUS OWNERS ON THE BACK OF THIS PAGE* ******

.....

NAME OF OWNER: _____

BARN NAME OF HORSE: _____

REGISTERED NAME OF HORSE: _____

LIFETIME EARNINGS IN BARREL RACING: \$ _____ Nomination \$ _____

LIFETIME EARNINGS IN POLE BENDING: \$ _____ Nomination \$ _____

ALL AROUND: Nomination\$ _____

SUB TOTAL \$ _____

**** *LIST ALL PREVIOUS OWNERS ON THE BACK OF THIS PAGE* ******

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GRAND TOTAL OF NOMINATION FEES: \$ _____

SIGNATURE: _____ DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PHONE: _____

EMAIL: _____



For Office Use Only

All Nomination Fees Paid Per Horse YES NO

Previous Owners for Horse #1:

Previous Owners for Horse #2:

Previous Owners for Horse #3: