

CARRY OVER: YES NO INITIALS _____

Draw # _____

SOUTHEAST TEXAS BARREL RACING ASSOCIATION

OPEN 5D BARRELS

Date _____

Member: Yes No

Name _____

Horse _____

BBR # _____

Hometown: _____

<p>TIME: _____</p> <p>Penalty: _____</p>

REV: 08/12/21 CLE

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