

**TOURNAMENT OF CHAMPIONS
ENTRY FORM 2023**

Send Pay Pal To: Kim@Lmsassociates.com or Checks/MO to Brad Johnson 7314 Bridges Ave, Richland Hills TX 76118

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **EMCAT #:** _____

EMAIL: _____

WEEKEND PASS (Sat + Sun) \$80 \$ _____

SATURDAY ONLY \$70 \$ _____

SUNDAY ONLY \$70 \$ _____

YOUTH HALTER & PERFORMANCE \$20 \$ _____

PROXY FEE PER HORSE (\$3 each x horses, limit 10) \$ _____

PROXY FEE UNLIMITED \$60 \$ _____

Proxy Shower: _____

LATE FEE (IF PAID AFTER APRIL 15th) \$15 \$ _____

EXTRA FULL TABLE \$25 \$ _____

VENDOR ONLY ENTRY \$25 \$ _____

SPONSORSHIPS \$ _____

Class you would like to sponsor (\$10 each): _____

Donation for the American Cancer Society : _____

TOTAL FEES DUE:.....\$ _____

Seating/Other Requests: _____

(will be accommodated as much as possible)