



Tour of Champions Vet/Draw Out Form

Must be received in office by 6pm Thursday before show

Rider Entered: _____ **Phone:** _____

Horse Entered: _____ **Draw # (if known):** _____

Race(s) to Scratch: *(please check; side pots change automatically)*

- _____ **Saturday Futurity**
- _____ **Saturday Open**
- _____ **Saturday Youth**
- _____ **Saturday Poles**
- _____ **Sunday Futurity**
- _____ **Sunday Open**
- _____ **Sunday Youth**
- _____ **Open Average**

Refunds will be mailed within (2) two weeks after the event, minus a \$25 per horse service fee.

Draw out forms can be submitted via email to rakitching@aol.com.

FOR OFFICE USE ONLY:

DRAWS UPDATED BY: _____

REFUND PROCESSED:

DATE: _____ **CHECK NO:** _____ **AMOUNT:** _____