ACADIANA BARREL RACING ASSOCIATION 2023 MEMBERSHIP APPLICATION



WWW.LAABRA.COM

BOARD USE ONLY:	Rec'd by:
	Date:

MEMBERSHIP: Participation and points begin to accrue only AFTER membership is paid.				
\$40 SINGLE		Attach Horse Information Sheets for all horses the membership will compete on.		
\$40 SINGLE (If Open or Age Division only - prior year completed form can be used) \$70 FAMILY Mother/Father and children (age 19 or over must have own membershi				
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MAIL To: ABRA Memberships, 13	24A Duchamp Rd, Broussard, LA	70518 or email: info@laabra	com	
NAME:		DATE OF BIRTH	.11	
*email and phone number are i	mportant - we avoid mailings to	o reduce cost - piease print d	cieariy	
E-MAIL ADDRESS:		PHONE: ()	PHONE: ()	
ADDRESS:		OITV	710	
(MAILING)		CITY	ZIP	
FAMIL	Y - PLEASE LIST <u>ALL</u> FAMILY M	EMBERS (include last names	s)	
NAME	Relationship	X if Contestant	DATE OF BIRTH	
I (we) agree to abide by all rules posted rules may result in my di this event at our own risk as to a any animal, participant, piece of RESPONSIBLE FOR MINOR CHI RULEBOOK and explained it to for any damages to ourselvs, ou participation in this association	isqualification. I (we), including any aspect of this event and und equipment or portion of the are LDREN**. I hereby certify I und all members listed above and al ar animals, our equipment or da	minor children, understand we derstand ABRA is not in the co ena or competition site. **PAI erstand this agreement and h Il family members. I (we) und mage we may cause others as	we ride and participate in are, custody or control of RENTS ARE ave read the ABRA erstand I am responsible s a result of our	
Signature:		Date:		