CGA State Show 2024

Team Event Sign Up Form

Rescue Race

Team name:			
	Mounted Rider:		
Rider No:	First Name:	Last Name:	
	Mount:	Signature:	
	I	Pickup Rider:	
Rider No:	First Name:	Last Name:	
	Mount:	Signature:	
	team must be CGA membe	ers. Please fill out an entry form for any rid e	ler not already in the show. Thi
multiple teams		or each team. No incomplete entries can be acopplies. A horse can only be in the event once.	
_	_	st 12 years old as of Jan 1, 2023. Bo . The Pickup rider may not be a Pic	

All fees must be submitted with entry form.

Fees: Total Rider count: 2 x \$15.00 = \$ 30.00