



LYNN MCKENZIE BARREL RACING CLINIC

Date: Nov. 30, 2024
Place: WA Arena, Sheridan, AR
Cost \$300

Entry form due: Nov. 24, 2022

**Send entry and a \$ 150 deposit to
(This is a non-refundable deposit)**

**Meg Harrington
477 Grant 135
Sheridan, AR 72150**

Name _____ **Phone** _____

Address _____

City _____ **State** _____ **Zip** _____

Number of horses _____ **Number of stalls needed** _____ **Cost each:** \$

If under 18: _____ **has my permission to attend the**

Lynn McKenzie Clinic. _____

(SIGNED)

Email Address _____

We need permission to add your email address to our LM Barrel Racing email list & to send you emails from time to time. "I want to be on your email list and receive the emails: Yes _____ No _____"

We also accept: Visa, Master Card, or Discover. You may also pay online by *PayPal*. Go to www.lmbarrelracing.com/clinic_page.htm For credit cards please include:

Name on Card _____ **Card #** _____

Billing Address _____ **Exp. Date** _____

City _____ **St.** _____ **Zip** _____

Signature _____

Every effort will be made to insure the safety of each student and their horse(s). I hereby release Lynn & Murray McKenzie, the Lynn McKenzie Clinic, and/or any of the sponsors, helpers, or facility owners from liability in case of accident or injury.

NOTARY PUBLIC

SIGNATURE (PARENT IF MINOR)

Please have entry notarized before returning.