

NORTHWEST MONTANA FAIR

265 N. Meridian Road

Kalispell, MT 59901

Phone: 406-758-5810 Fax: 406-756-8936

OFFICE USE ONLY

No. of Stalls Requested _____

Date Received _____

Approx. Date of Arrival _____

Stall Rent Assessed _____

STALL APPLICATION

Track _____

Mail this stall application to the tracks that you plan to attend. Make copies for each track.

OUT-OF-STATE HORSES MUST HAVE
COGGINS TEST

**STALL APPLICATIONS DUE:
1 MONTH PRIOR TO OPENING**

NAME OF HORSE <i>PRINT PLAINLY</i>	TATTOO NO.	SEX	AGE CLM	ALW. MDN.	DIST.	Q.H. T.B.	BREEDING <i>PRINT PLAINLY</i>	OWNER	VALUE OF ANIMALS

Please notify us of any change in your list of horses after stall application has been sent in.

ALL horses that have raced, must have up to date past performances available at time of entry. All non-starters must have a work at entry time.

I hereby make application for stalls for the above listed horses at the above named track. In the event this application is approved and stalls are allocated to me, I hereby expressly agree to race for the purse designated and will in all respects abide by the rules and regulations. I agree to accept as final the decision of the stewards on all racing matters.

Undersigned (acting on behalf of himself, or his principal or their agents or employees) agree, in consideration of and a condition for the acceptance of said application, to make no claim against anyone acting anyone acting by or through them, for loss, damage, or injury to any property, animal or person resulting from any cause, including negligence of any person resulting from any claims arising by reason of the negligence of any person or their employees or the acts of their animals. Undersigned agrees to report to the racing secretary any infraction of any of the posted or printed Rules and Regulations of said track by any person in or upon the premises of said track.

NAME OF APPLICANT

S.S. NUMBER

PERMANENT ADDRESS

STATE WHETHER OWNER OR TRAINER