



BETTER BARREL RACES
APPLICATION FOR SHOW ENDORSEMENT
 Complete ALL information below and sign. Please Print Clearly!
 APPLICATION WILL NOT BE CONSIDERED WITHOUT FLIER & APPROVAL FEES ATTACHED.

PO Box 720900
Norman, OK 73070

Phone: (405) 230-7167

Win\$More
Productions

Heartland
Tour

XL Enterprises
Gold & Silver Cup
Barrel Racing

betterbarrelraces.com

Producer Information

Company Name: _____

Contact Name: _____

Address: _____

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

Phone: _____ **Fax:** _____

E-Mail: _____

Website: _____

Show Information

List additional shows on attached sheets. Please include fliers if available.

Show Name/Location: _____

Show Date(s): _____

Schedule/Starting Time(s): _____

Added Money: _____ **Entry Fee:** _____

Percentage Payback: (Check One) _____ **80%** _____ **75%**

Divisional Time/Money splits: _____

Processing Fee: \$ _____ **Circle One:** **Per Rider** **Per Horse**
Circle One: **Per Event** **Per Day**

Classes/Format/\$ Splits: _____

Is show to be co-approved with another national organization: **Yes No**

Arena Address/Directions: _____

Certification

The information provided above is complete and accurate to the best of my knowledge, and I hereby request endorsement of the above listed show by Better Barrel Race (BBR). I have read and am familiar with the BBR rules and guidelines for endorsed shows and agree to abide by and be bound to them. I will submit a complete copy of the show results and any BBR membership applications and fees to the BBR office within seven (7) calendar days of the completion of each show. I understand that failure to comply with the above mentioned rules and guidelines or to submit show information and fees can result in BBR withdrawing endorsement of any subsequent shows.

I agree that Better Barrel Races, LLC, assumes no liability if I have not read these conditions and having not read these conditions, I am still held to their contents. I further agree that if any dispute should arise involving Better Barrel Races, LLC, the proper venue shall be Cleveland County, in the State of Oklahoma.

Signature: _____ **Date:** _____

Submit completed application and fees to:

Better Barrel Races, LLC, PO Box 720900, Norman, OK 73079



BETTER BARREL RACES

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Make copies as needed for additional shows. Please Print Clearly!

Show Information (cont.)

Please include fliers if available.

Show Name/Location: _____

Show Date(s): _____

Schedule/Starting Time(s): _____

Added Money: _____ Entry Fee: _____

Percentage Payback: (Check One) _____ 80% _____ 75%

Divisional Time/Money splits: _____

Processing Fee: \$ _____ Circle One: Per Rider Per Horse
 Circle One: Per Event Per Day

Classes/Format: _____

Is show to be co-approved with another national organization: Yes No

Arena Address/Directions: _____

Show Name/Location: _____

Show Date(s): _____

Schedule/Starting Time(s): _____

Added Money: _____ Entry Fee: _____

Percentage Payback: (Check One) _____ 80% _____ 75%

Divisional Time/Money splits: _____

Processing Fee: \$ _____ Circle One: Per Rider Per Horse
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Classes/Format: _____

Is show to be co-approved with another national organization: Yes No

Arena Address/Directions: _____

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Classes/Format: _____

Is show to be co-approved with another national organization: Yes No

Arena Address/Directions: _____

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