

LARGE GAZEHOUND RACING ASSOCIATION (LGRA) ENTRY FORM
GAZEHOUNDS IN TEXAS

Breed: **(one breed per form):** _____ Date: _____

LGRA #: _____ Call Name: _____ Sex: _____

Registered Name (Include Titles): _____

Sire: _____

Dam: _____

Date of Birth: _____ Registration or Tattoo # _____

LGRA #: _____ Call Name: _____ Sex: _____

Registered Name (Include Titles): _____

Sire: _____

Dam: _____

Date of Birth: _____ Registration or Tattoo # _____

LGRA #: _____ Call Name: _____ Sex: _____

Registered Name (Include Titles): _____

Sire: _____

Dam: _____

Date of Birth: _____ Registration or Tattoo # _____

I and my heirs, legal representatives and assigns shall hold harmless and defend Gazehounds in Texas, their officers, directors, committeemen and agents, from any claim for personal injury, illness or property damage arising out of my participation in this event. I agree to abide by the Official Rules and Regulations of the Large Gazehound Racing Association and its code of conduct during this race meet.

Signature of Owner _____ Date: _____

Owners' s Name _____ Phone: _____

Address: _____