

HIGH POINT HORSEMAN CLUB AWARD

MUST SIGN UP BEFORE 7:00AM ON THURSDAY

Exhibitor: _____

Back Number: _____

Horse Name: _____

RECEIVED BY PCJ Staff: _____

*(MUST BE SIGNED BY PCJ STAFF TO BE VALID & EXHIBITOR
SHOULD ACQUIRE A COPY)*

DATE: _____

Fax: 973-383-7302

(Please provide your fax number so we can fax back the signed receipt)