

ENTRY SHEET 2007

SALT LAKE COUNTY EQUESTRIAN PARK

MEDICATION: BUTE LASIX

DATE _____ RACE _____ DISTANCE _____ YDS.

OWNER

TRAINER

HORSE

JOCKEY

SIRE

DAM

COLOR _____ SEX _____ AGE _____ REGISTRATION # _____

TRAINER _____ ADDRESS _____

PHONE () _____ CITY _____ ZIP _____

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