



TEXAS
THOROUGHBRED
ASSOCIATION

NAME THAT FOUNDATION!!

Official Entry Form

Please print or type all information:

TTA Member Name: _____

Member # _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Name(s) Submitted:

1. _____

2. _____

3. _____

4. _____

5. _____

Signature: _____

Date: _____

**Return form to:
Texas Thoroughbred Association
P.O. Box 14967
Austin, TX 78761**

Or fax to (512) 453-5919