|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name | | | | | | Phone | | |
| Email address | | Home address | | | | | | |
| My Release Waiver is signed and attached.  Families will add minors’ names and ages to their waiver form. | | | YES | | | | | NO |
| Minor One/Age | | | | | Minor Two/Age | | | |
| I am a BSCT Member (required to attend)  Membership form at texasbrowndog.com | | | | YES | | | | NO  My membership form is attached |
| **I am a**  (circle one or more)  for  Entry Fees & Lunch | **Spectator Only** | | | | | | | NONE  6.00 for Lunch  Roustabout Competitor |
| **Crazy Quail Competitor**  Limited to 15 entrants unless time permits | | | | | | | 30.00 each dog entered  + 6.00 for Lunch |
| **Roustabout Competitor**  Limited to 10 entrants first come first served | | | | | | | 250.00 each dog entered  FREE |
| Membership Dues Amount Included | | | | | | | |  |
| TOTAL DUE | | | | | | | |  |
| Dog Name | | | | | | | Running Roustabout or Crazy Quail | |
| Dog Name | | | | | | | Running Roustabout or Crazy Quail | |
| Dog Name | | | | | | | Running Roustabout or Crazy Quail | |
| Dog Name | | | | | | | Running Roustabout or Crazy Quail | |

**BSCT Roustabout and Crazy Quail Field Day Registration**  
**Mail form and fees to Karen Dennis/BSCT Treasurer 1411 Silver Morning Drive Katy TX 77450**

**I have read the rules for the event/s in which I am entered and the information in the release** **form.**

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_