

HORSES WHO REMAIN ELIGIBLE FOR THE TRIALS AND FINAL OF THIS RACE MAY BE SUBJECT TO HAIR TESTING

Purse to be divided: 50% to winner, 20% to second, 10% to third, 6% to fourth, 4% to fifth,3% to sixth, 2.5% to seventh, 2% to eighth, 1.5% to ninth, 1% to tenth. Turf Paradise to contribute Purse for Consolation.

Ten horse gate will be used for trials and finals BELOW ARESTALLIONS NOMINATED TO THE 2019 DESERT CLASSIC STAKES PROGRAM

A REGAL CHOICE	EYE ON CORONA	JESS ZOOMIN	POOL	
ALAZOOM	FAVORITE CARTEL	JESSE JAMES JR	PRIME TIME DREAM	
BIG DADDY CARTEL	FIRST CLASS SIGN	JR DYNASTY MOUNTAIN	RIGHTER	
BOKNAAI	FIRST DOWN KING	JUNIOR JUNE BUG	QUICK TO FLARE UP	
BRIMMERTON	FIRST PRIZE DOC	KING OF HEART	SEPARATE INTEREST	
BROOKSTONE BAY	FIRST PRIZE STONE	KING OF THE TRACKS	SIMPLY MACH	
CARTERS CARTEL	FLYIN COLOR	KOOL WAGON	SIXES ROYAL	
CONN CREEK	GIORGINA	LEADING TEXAN	STREAKIN SIX CARTEL	
COPACORONA SPECIAL	HARD HITTING	LOGANS MOUNTAIN	TAC IT LIKE A MAN	
CORONA CALIENTE	HARLEMS LAST DASH	MAKINMOVES	TEXAS ICON	
COVERT	HEART TO SPARE	MR HIGH O SILVER	THE BOUNTY MAN	
DALE SCHISM	ICED N OAK	ONE SWEET JESS	THE CRAWFISH	
DASHAIR	JESS BEING VALIANT	ONE VALIENT HERO	WAGON TALES	
DEALAGAME	JESS GIVE IT EM	PAINTYOUROWNWAGON	WOODBRIDGE	
DEJON	JESS LIPS	PAPPASITO	ZEST QUEST	
DOWN AND DASH				

Release of Liability or Waiver of Liability I, the undersigned, and my parent/guardian, if applicable, do hereby release, indemnify, and hold harmless, The Arizona Quarter Racing Association, it board of directors, officers, agents, employees and volunteers or any sponsor from any and all liability claims demands and actions whatsoever arising out of or related to any loss, which may be sustained to me or any property belonging to me. The terms hereof shall also serve as an assumption of risk for my heirs, executor , executor and administrator for all members of my family, and may be pleaded as a bar to litigation. By my signature I agree to all terms and conditions as written on this form. Owner Signature

DATE

NAME OF	HORSE	SEX	SIR	E	DAM		FEES
Owner:			Phone:		·		
					Cell Phone:		
Address:							
					Zip:		
City:			State:				
Email Address:					Date:		
	SEND T	O: AQ	RA P.O.BOX 1316	THATCHER, AF	RIZONA 85552		
ALL PAYMENTS MUST BE POSTMARKED BY DUE DATE OR LATE FEES WILL APPLY.							
ANY MISSED PAYMENTS AFTER NOMINATION WILL DOUBLE.							

IL 602-625-0468 TO PAY BY CREDIT CARD (5% SURCHARGE