



## Belle Meade Hound Performance Trials HUNT ENTRY FORM



Entry Fee of \$1000 entitles five members to ride, eat and participate in all social events

**Trial Dates: January 12-14, 2023**

**Name of Hunt:** \_\_\_\_\_

**Participant # 1 Name:** \_\_\_\_\_

Mailing address: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

**Participant # 2 Name:** \_\_\_\_\_

Mailing address: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

**Participant # 3 Name:** \_\_\_\_\_

Mailing address: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

**Participant # 4 Name:** \_\_\_\_\_

Mailing address: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

**Participant # 5 Name:** \_\_\_\_\_

Mailing address: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

Print the release form posted on our website ([bellemeadehunt.org](http://bellemeadehunt.org)). Mail your check, this completed entry form and one completed release form per person to Mrs. Angela Smith, Honorary Secretary, Belle Meade Hunt, P.O. Box 60, Thomson, GA 30824. Soon after, you will receive your invitation to the Performance Trial event website and your assigned hound numbers. We look forward to seeing you!