



**CHANGE FORM**  
**March 19 – 22, 2026**  
**WACO, TX**

Complete rules and details online at  
[www.EliteBarrelRacing.com](http://www.EliteBarrelRacing.com)  
**EMAIL:** [entry@elitebarrelracing.com](mailto:entry@elitebarrelracing.com)  
**OFFICE:** 877-933-3277

**ALL CHANGES MUST BE COMPLETED BEFORE THE FIRST HORSE RUNS  
 IN THE RACE YOU ARE ENTERED.**

**PLEASE CIRCLE WHICH YOU ARE CHANGING:**

**HORSE**

**RIDER**

ORIGINAL RIDER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ORIGINAL HORSE ENTERED: \_\_\_\_\_

CHANGING TO: \_\_\_\_\_

IF RIDER CHANGE, NEW RIDER'S ADDRESS: \_\_\_\_\_

NEW RIDER PHONE: \_\_\_\_\_ NEW RIDER SSN: \_\_\_\_\_

RACE(S) ENTERED: \_\_\_\_\_

INCENTIVE(S) ENTERED, IF APPLICABLE, \_\_\_\_\_

HORSE CHANGE FEE (\$10): \_\_\_\_\_

RIDER CHANGE FEE (\$25): \_\_\_\_\_

BILLING INFORMATION	CREDIT CARD INFORMATION
NAME: _____	CC #: _____
ADDRESS: _____	EXP: _____ CVV CODE: _____
CITY, ST ZIP: _____	Card Holder Signature: _____

Indemnification and Release Personal Injury: By signing this document I hereby agree to hold harmless Elite Barrel Racing and the Extraco Events Center, its agents, management, contractors, and employees from any expense, cause of action, damage, or claim of damage, including legal fees of any kind, which I might assert as a result of my (or my child's) injury, death or claim by participating or driving to or from this event. I further certify that I have available a current NEGATIVE EIA TEST CHART on each animal I have on the event grounds. I understand that if State and Local Authorities require presentation of said test chart at this event and I cannot present a NEGATIVE EIA TEST CHART per anyone (1) animal, I will be responsible for any fines personally, and will be responsible for reimbursement of any fines to the event producer. YOUR SIGNATURE CONSTITUTES A RELEASE OF LIABILITY (If Minor, Parent or Guardian).

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

IF MINOR, PARENT/GUARDIAN: \_\_\_\_\_

**FOR OFFICE USE ONLY**

CASH \_\_\_\_\_

CC \_\_\_\_\_