

# Announcer Information

## 2021 Reunion Barrel Race

Josey Enterprises, Inc.

Draw #:

(PLEASE PRINT OR TYPE CLEARLY)

NAME (As you wish announced): \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Awards/Wins/Special Accomplishments: (Use the back if necessary)

Year

Accomplishment

Year	Accomplishment
_____	_____
_____	_____
_____	_____
_____	_____

Registered Name of horse: \_\_\_\_\_

REQUIRED FOR EQUI-STAT

(ONE SHEET FOR EACH HORSE YOU RIDE)

**\*\*\*NOTE: if you change horses before starting the Josey Reunion Race, please complete a corrected announcer sheet and let us know so we have the most up to date information.**

Age of horse: \_\_\_\_\_

Sire: \_\_\_\_\_ M: \_\_\_\_\_ G: \_\_\_\_\_ S: \_\_\_\_\_

Grand Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

What has this horse won: (Give year and accomplishment)

Year

Accomplishment

Year	Accomplishment
_____	_____
_____	_____
_____	_____

List any barrel racing associations you belong to: \_\_\_\_\_

First year you attended a Josey Clinic? \_\_\_\_\_

How many Josey Clinics have you attended? \_\_\_\_\_

**Your hometown newspaper**

Name \_\_\_\_\_ City/state: \_\_\_\_\_