



# 2025 CELEBRATION

August 20 – August 30, 2025

Celebration Grounds—Shelbyville, TN

## Premium Disbursement Form

(PLEASE ATTACH TO ANY ENTRY FORM(S) YOU SUBMIT)

FOR OFFICE USE ONLY

REC #

Premium Check

Made Payable to: \_\_\_\_\_  
(Full Name as filed on IRS Tax Forms)

Trainers in this Barn: \_\_\_\_\_

Name of Barn: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Social Security Number or Federal Tax Identification Number:**

\_\_\_\_\_

**NO PREMIUMS WILL BE ISSUED WITHOUT THIS INFORMATION**

I acknowledge that I am fully authorized to receive the premium referenced above. I understand that all premiums will be mailed, in the form of a check, to the address listed above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Winnings, less any entry or fee amounts, or other balances owed the Celebration will be paid by check drawn to the order of the name listed above within 20 business days following the final performance.**