



# CALIFORNIA CLASSIC 2024

Breeder / Contact Name:	Loft / Team Name:
Contact Number:	Email Address:
Street Address / City / State / Zip Code:	

Second Wind w/ Optional Races:	ENTRY FEE	A	B	C	WTA	TOTAL
Band Number(s):	(see info below)	25	50	100	200	
<b>TOTAL:</b>						

**ANY PARTICIPANT WITH A PRIZE OF \$600 OR MORE WILL NEED TO SUBMIT A W-9 FORM**

**SECOND WIND RULES**

The Second Wind race is flown at the distance of 350 miles, two weeks after the Final Race. Second Wind is an optional race with different pricing. See below.

1 bird  
**\$150**  
 2 birds  
**\$125 per bird**  
 3 or more birds  
**\$100 per bird**

**MAILING & PAYMENT INFORMATION**

ALL ENTRY FORM(s) & PAYMENT(s) TYPE ARE TO BE SUBMITTED AFTER THE FINAL RACE #3 305m. - 325m. No Exceptions.

(When mailing forms and checks, it is recommended to mail via Priority Mail and/or Overnight Mail)

The California Classic OLR and Staff is not responsible for tracking payment(s).

As a participant, you must follow up if your payment(s) have not cleared or are not entered in Wincompanion prior to the basketing of the Second Wind Race.

**ENTRY FORM(s) CAN BE MAILED or ELECTRONICALLY SENT**

(See Information Below)

**Mailing Address:**

California Classic OLR and Staff  
 15622 Lyons Valley Rd.  
 Jamul, CA 91935

**E-Mail:**

[calclassic.olar@gmail.com](mailto:calclassic.olar@gmail.com)  
 Subject Line: (Second Wind Entry Form)

**PAYMENT(s) CAN BE SENT ELECTRONICALLY OR VIA CHECK**

Proof of electronic payment(s) can be sent via e-mail ([calclassic.olar@gmail.com](mailto:calclassic.olar@gmail.com)) or text (619-454-7696).

When sending check(s) it is the participant's responsibility to make a copy or take a picture incase check(s) are lost in the mail.

**WHEN USING PAYPAL A 4% FEE MUST BE APPLIED TO THE TOTAL COST. MUST USE "GOODS AND SERVICES" OPTION. No Exception!**

**Send Electronic Zelle Payment(s) To:**

[ccsdrace@yahoo.com](mailto:ccsdrace@yahoo.com)

**Make Check(s) Payable To:**

California Classic

**PayPal Payment(s):**

[ccsdrace@yahoo.com](mailto:ccsdrace@yahoo.com)

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(For California Classic Race Officials Use Only)	Check Number:	Initial:	Date:
--	---------------	----------	-------