HANDICAPPING CONTEST April 25-27th, 2024 MY \$2 WIN-PLACE (NAME & NUMBER) HORSE NAME # RACE 1 **CENTURY DOWNS** RACE 2 **CENTURY DOWNS** RACE 3 **CENTURY DOWNS** RACE 4 **CENTURY DOWNS** RACE 5 **CENTURY DOWNS RACE 6 CENTURY DOWNS** RACE 7 **CENTURY DOWNS** RACE 8 **CENTURY DOWNS** RACE 9 **CENTURY DOWNS** RACE 10 **CENTURY DOWNS RACE 11 CENTURY DOWNS**

Name:		
Phone Number:		
EMAIL: if you want email updates		