

# FORM D

## FGRA ROYALTY COMPETITION WESTERN WEAR DESCRIPTION FORM

Contestant Name (Print) \_\_\_\_\_

Contestant Number: \_\_\_\_\_

Residing Home City: \_\_\_\_\_

Please write a brief description of your Western Wear (this will be read during modeling - please print legibly). If you need additional space, please use the back of this form.

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