

IWA Fall Festival October 15-17 2010

PLEASE PRINT/ ALL ADDRESSES NEED TO BE FILLED OUT FOR OWNER(S) AND ADDITIONAL RIDERS

HORSE NAME	BACK #
REGISTRATION NUMBER(S)	COGGINS #
OWNER'S NAME	IDOA#
STABLE NAME	HEALTH CERTIFICATE
OWNER'S ADDRESS	
CITY	STATE
	ZIP
TELEPHONE ()	EMERGENCY NUMBER ()
TRAINER'S NAME	WALKING HORSE TRAINERS ASSOCIATION #

Address:

CITY	STATE	ZIP
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CLASS	RIDER	FEE	CLASS	RIDER	FEE	CHARGE
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	

Versatility Classes not Checked by DQP /Classes 76-92 PLEASE USE MULTIPLE FORMS AS NEEDED

		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12			\$12	
		\$12	STAKE CLASS			
		\$12			\$30	
		\$12			\$30	
		\$12			\$30	
		\$12			\$12	
		\$12	CLASSES SUBTOTAL →			

Please Add the Name and Address of Additional Riders Here:	OFFICE FEE	\$5	\$5	
Name:	STALL	\$35		
Address:	<input type="checkbox"/> ¼ 8.75 <input type="checkbox"/> 1/3 \$11.75 <input type="checkbox"/> 1/2 \$17.50 <input type="checkbox"/> TACK STALL	\$35 (Full)		
	TRAILER TIE FEE PER HORSE	\$15		
Phone ()	PRELIMINARY RIBBON SPONSOR	\$15		
Name:		PRELIMINARY CLASS SPONSORSHIP	\$25	
Address:		STAKE CLASS SPONSORSHIP	\$110	
		STAKE CLASS RIBBONS	\$25	
Phone ()		STAKE CLASS TROPHY	\$30	
Name:		HOSPITALITY DONATION		
Address:		CAMPER FEE (Per Day)	\$18	
		TOTAL PAID		
Phone ()		CHECK #		
SHAVINGS PAID DIRECTLY TO THE ARENA MANAGEMENT		TOTAL PAID	CASH	