Participant Stall Order Form

DEADLINE May 1, 2024

This is a hard deadline - planning for success!

| Contact Name: | | E-mail: | | |
|--|---------------------------|-------------------------------|------------------------------|--|
| Emergency Phone #1: | | #2: | | |
| Address: | | | | |
| City: | | State: | Zip: | |
| Please Stable With: | | | | |
| I want to order the fol | llowing (please note if s | stallion): | | |
| Stalls @ \$135 | 5.00 each = \$ | | | |
| Tack Stall @\$ | 135.00 each = \$ | | | |
| End Cap @\$300.00 each = \$ | | (Breed Pavilion) | (Breed Pavilion) | |
| Total Due: \$ | | | | |
| Stall fees include three bale Center by calling (916)985- Method of Payment: | • | y and shavings may be purchas | ed at the Murieta Equestrian | |
| 🗌 Visa 🗌 Mas | ster Card 🗌 Discov | ver 🗌 Check Enclose | ed | |
| Card Holder: | | | | |
| | | | | |
| | | Security Code: | | |
| | | · · · | | |
| City: | S | tate:Zip: _ | | |
| Authorizing Signature: | | | | |
| Complete the informat | tion and return it to Ho | rse Expo, Inc.: | | |
| | Mailing Address | · · | /e | |
| | - | Rancho Murieta, CA | | |
| | Fax: | (530) 672-7490 | | |
| | Email: | letters@horsexpo.c | om | |