

CREDENTIAL REQUEST FORM EXHIBITORS

DEADLINE May 1, 2025

Combook		Booth #:		
Contact:				
		Cell:		
WHAT YOU GET: Three Exhibitor Passes pe or trucks. One additional		•	•	
Send in this form if you need EXT or mail to our office at: 7200 Lone			horsexpo.com,	
Method of Payment via Check	Only, payable to H	lorse Expo, Inc.		
Credentials may be purchased du	•		ou are responsible for	
your credential distribution. Will (Laii service is availat	oie.		
CREDENTIALS	QTY	UNIT PRICE	TOTAL PRICE	

Credentials must be picked up at the Show Office during Check-In. If you have any questions please call Western States Horse Expo at (530) 672-7490.

Credential Request Form Rev. 4/25



Credit Card Authorization Form

Name:						
Card Type:	o Visa	o MasterCard	o Discover	o American Express		
Card Numbe	r:					
Security code	Security code (CVV): Expiration Date(mm/yy):					
Credit Card E	Billing Address					
Cardholder's	Phone # (if iss	ues):				
Horse Expo N	May Charge:					
☐ Exhibitor Booth \$			☐ Credential Request Fee \$			
☐ Charge Total Due Now			☐ Stall Order \$			
□ Charge 50% Deposit Now and Automatically Charge Final Balance 5/1/25		☐ Other (please specify)				
		\$				
			·	to charge of \$		
(total amoun	nt) to the credi	t card provided for the s	ervices listed abov	e.		
Signature:						
Date:						