

STABLING REQUEST FORM

RETURN WITH ENTRIES TO:
LEESA BERHOW, N12861 190th Street, Boyceville, WI 54725

COPY OF CURRENT NEGATIVE COGGINS (12 mo. or less) MUST ACCOMPANY ENTRIES. ORIGINAL NEGATIVE COGGINS MUST BE AVAILABLE FOR INSPECTION AT THE SHOW

Detach this form and send with check payable to M.H.A.H.A. to the above address. No stalls will be reserved by phone. Straw bedding is not allowed on grounds. Shavings will be available for purchase. Show office must be notified of unused stalls. Do not rent out your stall. Trainers, if you are paying for the stalls of your clients, you must include their names on this form if they are sending in their own entries. No stalls will be assigned unless payment in full is sent with this form.

NO DOGS LEFT OVERNIGHT IN BARN!

NAME: _____

STABLE: (or stable with) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

PHONE: home _____ cell _____

I AM REQUESTING STALLS FOR: Check all that apply

Wednesday

Thursday

Friday

I AM BRINGING: # _____ HORSES

_____ Stallions # _____ Mares # _____ Geldings # _____ Foals

FEES: Transfer totals to entry form

_____ Box Stalls x \$ 50/Night = \$ _____

_____ Tack Stalls x \$55/N \$100/show \$ _____

_____ Bags of Shaving x \$12.00 = \$ _____

(Additional bags of shaving can be purchased in the show office)