

## Lawrenceburg Horse Show Registration

Exhibitor #	<u>Name of Rider</u>	<u>Name of person registering</u>	
Premium to be paid to:		<u>Email of person registering</u>	
Class #	Name of Horse	Owners full Name, City & State	Fee
Total			

## Stall Registration

Owner / Farm Names		Complete Mailing Address	
Owner		Attn:	
Owner		Street	
Farm		City	
Farm		State/Zip	
Contact Information		Barn Preference	
Primary Ph#		Circle One	
Alt. Ph#		C   D   F   G   H   I   NO PREF.	
Primary email			
Alt. email		Stall locations will be assigned as you arrive at the fairgrounds.	

	# of Stalls per Day rate	\$15/day	=	
	# of Stalls per Week rate	\$40/wk	=	
	# of Barn Passes	\$20/wk	=	
	# of bags of Shavings	\$8/bag	=	
	# of Box Seat rentals	75 /150	=	
Totals				