



# USEA STABLING FORM

OFFICE USE ONLY

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

Rider Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Stable with: \_\_\_\_\_

(Please use one unique name for your group. Show Management will do their best to match up individual names.)

Special needs/requests: \_\_\_\_\_

Please complete all sections below. Place check marks in appropriate box, indicating the nights stabling is needed.

Horse Name	Stallion/Mare/Gelding	Height	Dates Stabling Required	Mon	Tue	Wed	Thu	Fri	Sat	Sun

Need a Tack Stall?  Yes  No

Approximate Time of Arrival: \_\_\_\_\_

Stalls \$ \_\_\_\_\_

Rider staying at: \_\_\_\_\_ Phone: \_\_\_\_\_

Tack Stalls \$ \_\_\_\_\_

RV/Camper Hook-ups (if available):  Yes  No Fee: \$ \_\_\_\_\_

RV Hook-up \$ \_\_\_\_\_

Transport is:  Small Trailer in feet \_\_\_\_\_  Large Trailer or Van in feet \_\_\_\_\_

Other \$ \_\_\_\_\_

If available, I prefer:  Straw  Shavings

**TOTAL \$** \_\_\_\_\_

**Make copies of this form as needed.**

**PAYMENT:**  Included with entry check.  Separate check