TQHA INTRO SHOW
STALL RESERVATION

Billing/Trainer's Tab Sheet

Stall with : _____

Name: _____

Cell Phone Number on the Grounds: _____

STALLS: # of HORSE stalls _____ # of tack stalls _____ TOTAL # of stalls _____

SHAVINGS Total number of shavings ordered _____

Credit Cards are used to hold stalls and will not be charged

Credit Card #_____Exp_____Name on Card_____

Name FIRST & LAST	**Back # (If known)**	**Number of horse stalls**	**Split/Portion of tack stall**	**RV Nights**	**Number of shavings**