## **CAMPER & RV RESERVATION FORM**

## NO PHONE RESERVATIONS | FIRST COME FIRST SERVE | NON-REFUNDABLE

Each camper must have a reservation form sent in with entries to the office in order to secure a camper slot. Campers without reservations could be parked off the grounds and/or without power and water. Each reservation will be assigned a camper slot. A Camper Chart will be posted at the same time as the Stabling Chart.

| Name of Owner:      |  | Phone:  |
|---------------------|--|---|
| Address:            |  |   |
| Email:              |  | Barn Name:  |
| Credit Card Number: |  | Name on Card:   |
| Expiration Date:    | Zip Code for Card:   | CVV:  |
|                     | % surcharge is applied to credit<br>eservations are for the entire s | t card transactions.<br>show (11/15/2023 – 11/19/2023). |

Email to stabling@showwiththeco.com | Fax to: 678-809-0419

## STABLING & SHAVINGS ORDER FORM

## PLEASE COMPLETE AND INCLUDE WITH ENTRY FORM - FORM IS MANDATORY

Stalls and shavings will not be reserved without form. Please note that stalls are non refundable.

Tack stalls may be limited to 1 per stable group, depending on the size of the horse show. Please list each horse and owner individually by name, and indicate how many bags of shavings are needed next to each owner's name. List tack stall separately. **NOTE:** Each horse for which you are bringing your own bedding. *Bedding is mandatory in all occupied stalls.* You are responsible for all pre-ordered shavings, which will be billed and delivered according to this form. Additional shavings can be ordered on-site at the show office. Stalls will be reserved when each horse's entries are received.

| OFFICE<br>USE | HORSE'S NAME | OWNER'S NAME             | # BAGS OF<br>SHAVINGS | OFFICE<br>USE |
|---------------|--------------|--------------------------|-----------------------|---------------|
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|               |              |                          |                       |               |
|               |              | TOTAL # BAGS OF SHAVINGS |                       |               |