

2018 MARITIME HUNTER JUMPER FINALE STALL REQUEST

CONTACT INFORMATION (All information is mandatory) COACHES/TRAINERS: To ensure accurate stall count, please provide one **Stall Request Form per coach/trainer**, and list all horses stabling with you.

COACH/TRAINER NAME		STABLE NAME	
PHONE NUMBER (CELL)		EMAIL	
ARRIVAL DATE	TIME:	SPECIAL REQUEST	
DEPARTURE DATE	TIME:		
PRE-ORDER SHAVINGS (TOTAL - ALLOCATE BELOW):		COACHES/TRAINERS: INDICATE ANY SPECIAL REQUESTS	
# of Bags : _____ x \$7 = \$ _____ + HST _____			

All stall fees are non-refundable under any circumstances, and must be paid in advance. All stalls must be booked on this form. All stall request forms must be accompanied by payment in full (add fees to entry form).

Horse Name	Show Rate \$120	Arrival Date	Departure Date	#Shavings/ \$\$	Total
	Day Rate \$40 (add 15% HST)				

INDICATE PREFERRED NUMBER OF TACK STALLS:
(TACK STALLS ALLOCATED ONLY IF AVAILABLE AFTER ALL HORSES ARE STABLED)

Please mail or email this request form to:
info@covesidestables.com - Mailing address: P.O. Box 719, Chester NS B0J 1J0
All forms available on line at www.covesidestables.com
CHEQUES PAYABLE TO: COVESIDE STABLES LIMITED