

# 2018 TRI-STATE STALL RESERVATION FORM

Stalls will be assigned using this form only. Phone or fax reservations will not be accepted.

To be eligible for a refund, the Barn Manager (860-377-0845) must be notified of cancellation by the **SATURDAY** preceding the show. **You must confirm cancellation ONLY with the Barn Manager.**  
**No horses will be allowed on the grounds before 1:00PM Thursday.**

**BLUE OR  
BLACK INK  
ONLY**

**Payment must accompany reservations!**  
**Stalls: \$115 each/weekend**

Make checks payable to TSHA.  
 Mail To:  
 TSHA Open Show Barn Reservations  
 366 Bungay Hill Road  
 Woodstock, CT 06281

OWNER/FARM NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ SHOW DATE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Please Read &**

**NOTE THE  
POSTMARK  
DATES**

Stall reservations for the 1<sup>st</sup> show will be accepted starting with a **POSTMARK DATE** of May 1, 2018. **NO EXCEPTIONS.** All Reservations must be **mailed** and any received with a postmark prior to **May 1** will be **INVALID** and returned for re-submittal with no consideration of the earlier date received. Reservations for the 2<sup>nd</sup> and 3<sup>rd</sup> shows will be accepted with a **POSTMARK DATE** of no sooner than the **MONDAY** after the previous show. Stalls will be assigned on a first-come, first-paid basis and locations assigned are at the discretion of the Committee. All stall reservation fees must be paid in full prior to the show. No blank or post-dated checks will be accepted. Any returned check will cause forfeiture of the stalls it covered. All stall reservation forms must list horse's name, owner's name or its use as a tack stall. No empty stalls may be reserved. Reservations not in compliance will be marked incomplete and returned with no consideration of earlier date. The Open Show Committee reserves the right to limit the number of tack stalls requested.

List all names of those wishing to be stabled together and relative information on the form below. **\$35.00 FEE CHARGED ON ALL RETURNED CHECKS**

Horse's Name ( Must match name on entry form)	Exhibitor/Owner Name (Must match name on entry form)	Exhibitor/Owner's Address	TSHA use only Do not write in this column
1			
2			
3			
4			
5			
6			

**ATTACH additional sheets if necessary. Please do not list more than six (6) horses per form.**

**REMINDER:** For parties wishing to be stabled together, reservations **MUST** be submitted in the same envelope.

Office Use Only- Do not write in box

Signature \_\_\_\_\_ Date \_\_\_\_\_ Barn Preference (circle one): **UPPER** **LOWER**  
 \*\*No guarantee can be given for barn preference.\*\*