



**FALL COTC PRE-PAID STALL FORM
SHOW DATES October 21-22, 2017**

NAME _____

ADDRESS _____

CITY _____ STATE _____

PHONE _____ EMAIL _____

TRAINER'S NAME _____

I WOULD PREFER TO BE STALLED NEAR _____

STALLS \$60 IF PAID BY OCTOBER 5 \$75 AFTER OCTOBER 5

****NO REFUNDS ON PREPAID STALLS****

Number of stalls _____ amount due _____ ck # _____

**Make check payable to CPHC and mail to:
Al Bendig, 15717 Oxford Glenn Drive, Huntersville, NC 28078**

PAYMENT MUST ACCOMPANY FORM TO RECEIVE DISCOUNTED RATE



WWW.VISITMARTINCOUNTY.COM

WWW.APHA.COM

WWW.CAROLINAPAINTHORSECLUB.NET

WWW.VIRGINIAPAINTHORSECLUB.ORG