Trophy Sponsor Form

Doc Bol Memorial Horse Show

_____ Class Trophy Sponsorships @ $20

_____

_____

_____ Total due: $ _____

Name: _____ Stable/Business: _____

Address: _____ Phone: _____

City: _____ State _____ Zip: _____

Make checks payable to MWHA

Mail forms & checks to:

Joleen Waalen
4994 Hamlet Ave.N., Apt. 304
Oakdale, MN 55128

(612) 382-2835
e-mail: jwaalen@aol.com

Stabling Reservation Form

Doc Bol Memorial Horse Show

_____ Box Stalls at $30 each Total: $ _____

(Bring your own bedding)

Name: _____ Stable/Business: _____

Address: _____ Phone: _____

City: _____ State _____ Zip: _____

Make checks payable to MWHA

Mail forms & checks to:

Joleen Waalen
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Oakdale, MN 55128

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