

PASC TRAINER'S FORM

PLEASE FAX THIS FORM WITH YOUR ENTRIES

Fax 954-343-9805

Farm name: _____ Date: _____

Trainer's Name: _____

Trainer's Phone Number: _____

I am bringing _____ horses.

I need _____ tack stalls for a total of _____ stalls.

Number of entries splitting tack stall: _____ **NOTE: Specify the split fee under Tack Stalls on each of your entry forms.**

Sharing horses:

Specify which horses are being split by which riders and who is responsible for the stall fee or if it being split between riders. **Please specify that on this form and on the riders' entry forms.**

Horse's name: _____

Riders' Names: _____

Who will pay the stall fee: _____

Horse's name: _____

Riders' Names: _____

Who will pay the stall fee: _____

Horse's name: _____

Riders' Names: _____

Who will pay the stall fee: _____