

KASPHA Academy Entry Form

Entries must be received by **May 9, 2018** at **4PM**

Entries may be mailed or emailed to:

Gail Vogel
3518 Sample Way
Louisville, KY 40245
vogel@twc.com

For information you may contact
Gail at (502) 619-8330

BACK NUMBER <small>(Assigned by Office)</small>	CLASS NUMBER	RIDER'S NAME	NAME OF HORSE	RIDER'S CITY/STATE	RIDER AGE	ENTRY FEE \$20.00

CONTACT NAME _____
STABLE NAME _____
STABLE ADDRESS _____

CONTACT PHONE _____
CONTACT EMAIL _____

TOTAL ENTRY FEES: \$ _____
ACADEMY STALLS @ \$50.00 EACH
_____ x 50.00 = \$ _____
CLASS SPONSORSHIP @ \$50.00 _____

TOTAL AMOUNT DUE: \$ _____
