# ***2019 WPQHA's ENTRY OFFICE CHARGE SHEET***

**Date:** _____

**Name Stalls Reserved By:** _____

**Number Of Stalls Reserved:** _____ **Number of Tack Stalls** _____

**Number of Camper Spots:** _____

**Total Number Shavings:** _____

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**STALLS/ CAMPER SPOTS/ SHAVINGS CHARGED AS FOLLOWING:**

| Back # | Name – (Responsible Party) | Stalls | Share Tack | Shavings | Electric |
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**********FOR OFFICE USE ONLY**********

**# of Tack Stalls ____ Split Between # of People ____ Charge $_____**

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**Trainers - Please leave a check at the office with this form for payment of unpaid balances on accounts.**