Submitt Trainer Sheet Upon Arrival to Show

Trainer - _____ Phone # _____

	Horse's Registered Name	Barn Name	Person Responsible for Paying	Stall	SHV	PWU	HAY	# RV	Nights at Show M	T	W	TH	F	SA	SU	NOTES
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20				0												
			TOTALS	0	0	0	0	0								