

Please respond by April 20, 2018



Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I look forward to attending Horsin' Around at the Derby for Equestrian's Kids!

\_\_\_\_\_ Total number of tickets (\$100 per ticket) or  Table(s) of eight \$775

Total amount enclosed \$ \_\_\_\_\_

My check, payable to Equestrian Center for Therapeutic Riding if enclosed.

Please charge my:  Visa  Mastercard

Credit Card No.: \_\_\_\_\_ Expiration Date \_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

I am unable to attend, but a donation of \$ \_\_\_\_\_ is enclosed.

All contributions are tax-deductible. The fair market value is \$25.00 per person.

Please register and provide detailed information for all guests.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **ZIP:** \_\_\_\_\_

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