

# KASPFA Academy Entry Form

BACK NUMBER <small>(Assigned by Office)</small>	CLASS NUMBER		RIDER'S NAME	NAME OF HORSE	RIDER'S CITY/STATE	RIDER AGE	ENTRY FEE
	1st class	2nd class					

**CONTACT NAME** \_\_\_\_\_  
**STABLE NAME** \_\_\_\_\_  
**STABLE ADDRESS** \_\_\_\_\_  
 \_\_\_\_\_  
**CONTACT PHONE** \_\_\_\_\_  
**CONTACT EMAIL** \_\_\_\_\_

<b>TOTAL ENTRY FEES:</b> \$ _____
<b>ACADEMY STALLS @ \$50.00 EACH</b> # _____ x 50.00 = \$ _____
<b>CLASS SPONSORSHIP @ \$25.00</b> _____

<b>TOTAL AMOUNT DUE:</b> \$ _____
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