



Stalling and Camping Reservation Form

Contact Name: _____

Contact Cell #: _____

Contact Address: _____

Contact Email Address: _____

RV/Trailer length: _____ Slideouts: Yes No License plate number: _____

**All horses are required to have a 30 day health certificate and will be asked to fill out a health declaration form upon arrival on grounds.*

STALLING

10x10 stalls (includes rubber mats and 2 bags of shavings)

Weekend - **\$60/stall** x _____ (**# of stalls**) = \$ _____
Weekend rate includes stall Thurs, Fri, & Sat nights – Sunday night not included.

Per night - **\$30/stall/night** x _____ (**# of stalls**)= \$ _____

Additional Shavings – **\$7/bag** x _____ (**#of bags**) = \$ _____

RV CAMPING

Electrical hookups located behind barns

(No water/dump available on site. Restrooms and showers located in the barn)

50Amp hook up - **\$30/night** x _____ **# of nights** = \$ _____

30Amp hook up - **\$25/night** x _____ **# of nights** = \$ _____

20Amp hook up - **\$20/night** x _____ **# of nights** = \$ _____

Total for Stalling and RV Camping = \$ _____

**Stalls and RV are reserved on a first come first serve basis and not reserved without payment.
No portable pens allowed.**

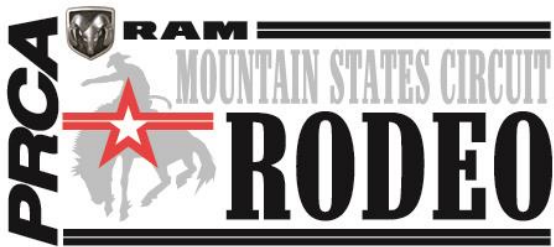
Reservations Due by Friday, October 19th, 2018

RETURN INFORMATION

Please return forms and payments to Kara Mahlmeister

Email: mahlmeka@co.larimer.co.us

Phone: (970) 619- 4011



Declaration Health Form

ONE TRAILER PER DELCARATION FORM

**All horses are required to have a 30 day health certificate and will be asked to fill out a health declaration form upon arrival on grounds.*

Contact Information:

Responsible Party (person in charge of horse(s) at the event): _____

Cell Phone: _____ Email: _____

Address: _____

Dates on site: _____

Horses in Shipment:

Name of Horse	Name of Owner	Health Certificate #	Sex	Color

Origin Information (Event from which horse(s) last attended):

Event: _____ State: _____

Dates: _____

Horse Health Declaration:

I, _____ declare that the horse(s) name above has/have been in good health, with body temperature below 102 degrees F, eating normally and has/have not shown signs of infectious disease for the three (3) days preceding arrival at this event.

Print Name: _____ Date: _____

Signature: _____