



Return to: Ryegate Show Services, Inc
 1298 Royal Rd
 Annville, PA 17003
 Phone: 717-867-3005 Fax: 717-770-2048
 AnnetteL@ryegate.com

2019 PENNSYLVANIA NATIONAL HORSE SHOW FEED ORDER FORM

No orders will be delivered without either a signed open check or credit card information below.

We will not charge your credit card until you check out. Exhibitors must close out their bill in the feed office before they leave or it will be closed out for you within 24 hours of your departure. No splits of a trainer bill will be permitted at after an account has been closed.

If it becomes necessary to change or cancel your order, please do so before your arrival date.

6% PA State Sales Tax added to all orders.

- | | | |
|--|--|--|
| <input type="checkbox"/> Shavings | <input type="checkbox"/> Timothy Hay | <input type="checkbox"/> Triumph Professional Pellet |
| <input type="checkbox"/> Straw | <input type="checkbox"/> Timothy Alfalfa Mix | <input type="checkbox"/> Triumph Active 12 Textured |
| <input type="checkbox"/> Mulch - Black | <input type="checkbox"/> Carrots (1#) | <input type="checkbox"/> Triumph Active 12 Pellet |
| <input type="checkbox"/> Mulch - Brown | <input type="checkbox"/> Carrots (50#) | <input type="checkbox"/> ProElite Performance |
| <input type="checkbox"/> Mulch - Red | | <input type="checkbox"/> Alfalfa Cubes (50#) |
| | | <input type="checkbox"/> Steamed Crimped Oats (50#) |
| | | <input type="checkbox"/> LEGENDS CarbCare Senior |
| | | <input type="checkbox"/> LEGENDS CarbCare Performance |
| | | <input type="checkbox"/> LEGENDS Race & Compete |
| | | <input type="checkbox"/> Wheat Bran (25#) |
| | | <input type="checkbox"/> Beet Pulp - No Molasses (40#) |
| | | <input type="checkbox"/> Ground Flax Seed (50#) |
| | | <input type="checkbox"/> Whole Oats (50#) |

Bill to: horse or owner name or trainer name

Stable with Trainer NAME - no farm names please

Arrival Date & Time

Junior Weekend stalls available 10/9 @ 8 am
Senior Week stalls available 10/13 after 6 pm

Please print clearly & complete all information.

Cardholder _____

Address _____

City _____ State _____ Zip _____

Tel: _____ Email: _____

Visa MasterCard Discover Amex

Expiration Date /

Security Code

I authorize Ryegate Show Services, Inc, to debit my account for for feed and bedding, and/or entries, as specified; which I or my agent(s) have ordered during the Pennsylvania National Horse Show.

Signature _____