

**PRE-ORDER FORM  
FEED & BEDDING**

**ST. CHRISTOPHERS HORSE SHOW  
MAY 9-13**

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

Trainer: \_\_\_\_\_

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

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

Fax: \_\_\_\_\_

Date & Time of Arrival: \_\_\_\_\_

Bill to specific horse: \_\_\_\_\_

	<b>Quantity</b>
Shavings	_____
Straw	_____
Timothy	_____

**All orders must be secured  
by either an open check or  
credit card authorization  
form for any delivery!  
NO exceptions!**

All orders are charged to your horse show barn account unless we are told differently. All trainers doing splits must do so in writing during the show. No splits will be taken after Friday 5pm.