

HORSE SHOW
REGISTRATION FEES



AREA: _____ **AGENCY:** _____

_____ Athletes & Unified Partners X \$25.00 = \$ _____

_____ Coaches in Quota X \$25.00 = \$ _____

ADDITIONAL CHARGES:

Extra Coaches not in Quota / Bus Drivers / Nurses (\$20 per extra person)
(The \$20 fee includes all meals, credentials, insurance)

_____ Extra persons not in Quota X \$25.00 = \$ _____

****No shavings will be included this year. Please include number of bags you will need and include it in your amount paid.****

_____ Bags of shavings X \$7.00 = \$ _____

HOUSING FOR EXTRA PEOPLE:

_____ Rooms X _____ nights X \$80.00 = \$ _____

Enclose full payment to: Special Olympics Georgia

Check # _____ Total of above enclosed = \$ _____

Call Daniel at ext. 112 with any questions concerning fees.