



Rolling Rock Farm Horse Shows  
Stall Reservation Form

Show Date \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Barn \_\_\_\_\_ Trainer \_\_\_\_\_

# of Stalls \_\_\_\_\_ Day  Night

Stable with \_\_\_\_\_

Deposit required: \$45 day stall, \$65 overnight stall (Fri-Sat)

Debit/Credit # \_\_\_\_\_

Name on Card \_\_\_\_\_

Exp \_\_\_\_\_ CVC \_\_\_\_\_ ZIP \_\_\_\_\_

I authorize Rolling Rock Farm, LLC to process the stall deposit for the show dated above. I acknowledge that the deposit is non-refundable except for veterinary excuse provided.

Sign \_\_\_\_\_ Date \_\_\_\_\_.

