



## DOWNEAST STABLING/FEED ORDER FORM

**Stall Watch:** this is a mandatory service and will help keep all horses safe. Please complete form found on stall front.

**Note to trainers:** *In order to have an accurate stall count for your barn, please list all individuals stabled with you! Also include any tack or grooming stalls.*

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

Trainer Name & Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

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

**All stalls must be prepaid with separate check.**

Prepaid stalls, payment due Sept. 1<sup>st</sup>: \$160/stall.

Late stalls: \$185/stall.

**Please list all horses stabling with you:**

|    | Horse's Show Name              | Owner Name |
|----|--------------------------------|------------|
| 1  |                                |            |
| 2  |                                |            |
| 3  |                                |            |
| 4  |                                |            |
| 5  |                                |            |
| 6  |                                |            |
| 7  |                                |            |
| 8  |                                |            |
| 9  |                                |            |
| 10 |                                |            |
| 11 |                                |            |
| 12 |                                |            |
| 13 |                                |            |
| 14 |                                |            |
| 15 |                                |            |
|    | <b>Tack Stalls:</b>            |            |
|    | <b>TOTAL NUMBER OF STALLS:</b> |            |

**ALL BEDDING ORDERS MUST BE MADE TO: MCCARTHY ENTERPRISES**

(207)474-8952 or email: [agmccarthy@hotmail.com](mailto:agmccarthy@hotmail.com)

Shavings, hay, and stall mats

Please call or email early so your orders will be at your stall when you arrive.

Mandatory Horse Night Watch: Night watch is a mandatory service (see Rules and Regulations).

Trainer Cell: \_\_\_\_\_ Farm/Trainer Name: \_\_\_\_\_

Emergency Contact 1: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact 2: \_\_\_\_\_ Cell: \_\_\_\_\_

**Payment: Checks may be made payable to Downeast Medal Finals**

**Mail to: ML Rahlson, 9 Flume Street, Concord, NH 03303**