



EquiSmartz Contest Invoice

Mail to:

Sandy Arnold, Equine Extension Associate
 VT MAREC
 5527 Sullivans Mill Road
 Middleburg, VA 20117

To register, complete this form in Excel, print and
 postmark this invoice with payment no later than
 April 24 2019

*****PLEASE COMPLETE ALL TAN SHADED AREAS*****

TEAM [Club Name] [Coach Name] [Street Address] [City, ST ZIP Code] [Phone]	Unit: [County Name] [Coach email]
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QTY	CONTEST	Team / Individual (First Names)	JR / SR	UNIT PRICE	LINE TOTAL
4	Hippology	Jen, Michael, Joy, Jim	JR	\$ 10.00	\$ -
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
TOTAL					

Make checks payable to VTF - Horse OR Journal Transfer from Foundation account into 4-H Horse Program with
 Acct Fund #881389 and Org #000643 . Payment information ➔

Journal Transfer# _____ OR Personal Ck# _____
 OR PO# _____ (if through Hokie Mart)

Agent Signature needed only for payments through Hokie Mart or Journal Transfer.

 Extension Agent Signature Date

 Agent Email

 Coach Signature Date

Horse Judging = \$15 per contestant
 All other contests = \$10 per contestant