



## CAMPER/RV RESERVATION FORM

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Camper/ RV Make: \_\_\_\_\_ Color: \_\_\_\_\_

Camper/RV License Plate #: \_\_\_\_\_ State: \_\_\_\_\_

50 or 30 Amp: \_\_\_\_\_ Trainer: \_\_\_\_\_

Reservation Date: \_\_\_\_\_ Event: \_\_\_\_\_

Show Week Fee: \$350. February: Winter Series Week 1      Winter Series Week 2

March: Winter Series Week 3      Winter Series Week 4

Off Show Week Fee: \$250 Please specify Weeks \_\_\_\_\_

Rules and Regulations are posted at entry.

On-site emergency call (661)557-0234 or email ([rosie@terranaequestrian.com](mailto:rosie@terranaequestrian.com))

I agree to the above terms.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to: [showoffice@terranaequestrian.com](mailto:showoffice@terranaequestrian.com)

