



North Carolina State Championship Horse Show Vendor Form

September 12-15, 2018 • Raleigh, NC

Vendor Name: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Description of Business/Products: _____

Payment Enclosed: _____ Check Number: _____

MC/Visa/AX: _____ Exp. Date: _____ CVC: _____

\$100 Vendor Fee

Includes 10 x 10 Vendor Space
2 wristbands for Carolina Honky-Tonk

During the term of this contract and to the full extent permitted by law, the Vendor releases UPHA Chapter 12 NCSCHS and all its staff and agents from any and all claims for any damage, losses, or injury to persons or property of the Vendor or anyone accompanying the Vendor at the show.

Vendor Signature _____ Date _____

Make checks payable and mail form to:

UPHA Chapter 12 NCSCHS

c/o Beth Snider

65 Old Taylorsville Rd.

Shelbyville, KY 40065

Email to: horseshowentries18@gmail.com

Visit us at: UPHAChapter12.com