



Auditor Enrollment Form

EAP National Finals – Country Ridge Stables

Auditor Name: _____

Address: _____

Email: _____ Phone: _____

Dates to Audit:

___ Thurs 11/17 ___ Fri 11/18

___ Sat 11/19 ___ Sun 11/20

Audit fee per person:

___ Thurs only(no fee/no meals)

___ \$150 for a 4 day pass

___ \$60 per day (Fri-Sat) for single days

___ \$30 Sunday only audit

___ \$45 Optional EAP Finalists Dinner Banquet

(reservation and payment for dinner no later than 11/10/11 – Sorry no dinner refunds)

Note each rider is allowed one auditor at no charge.

Audit includes light breakfast and lunch.

Send completed form and payment (made to Laura Stern Stables)
Country Ridge Stables, 27060 N Owens Rd, Mundelein, IL 60060
fax to: 847-837-9350

*Registrations can not be accepted over the phone.

Contact Kimber 847.436.1234 for questions or visit
www.ushja.org/EAP/EAP_national.aspx

