

**2025 PHBA WORLD CHAMPIONSHIP HORSE SHOW  
STALL RESERVATION FORM  
JULY 9-19, 2025 ~ SPRINGFIELD, ILLINOIS**

Mail forms to PHBA \* 15253 East Skelly Dr \* Tulsa, OK 74116-2637  
Phone: (918) 438-1234 Fax: (918) 438-1232 Website: [www.palominohba.com](http://www.palominohba.com)

**Stall Agents Name** \_\_\_\_\_  
**Owners Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Home Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_ **Fax** \_\_\_\_\_  
**Email Address** \_\_\_\_\_  
**Emergency Contact Information** \_\_\_\_\_  
**Hotel** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Room#** \_\_\_\_\_

**HORSE'S NAME** \_\_\_\_\_

**(One stall or day stall is required per Horse/World Show Entry)**

NO WORLD SHOW REFUNDS \* Incomplete entry blanks will not be accepted \* US Postmark with US Funds will be used in determining fees.

**Arrival Date** \_\_\_\_\_ **Departure Date** \_\_\_\_\_

**HORSES MAY MOVE INTO STALLS ON MONDAY; JULY 8th AT 7 AM**

**Early arrival arrangements MUST be made through the PHBA Office; additional fees may apply.**

	<b>On or before 5/15/2025</b>	<b>On or after 5/16/2025</b>	
<b>Youth Stalls (July 8-13)</b>	<b>\$135.00 ea</b> _____	<b>\$185.00 ea</b> _____	<b>= \$</b> _____
<b>Youth Tack Stall</b>	<b>\$135.00 ea</b> _____	<b>\$185.00 ea</b> _____	<b>= \$</b> _____
<b>Open/Amateur/Youth Stalls (July 8-20)</b>	<b>\$230.00 ea</b> _____	<b>\$280.00 ea</b> _____	<b>= \$</b> _____
<b>Open/Amateur/Youth Tack Stall</b>	<b>\$230.00 ea</b> _____	<b>\$280.00 ea</b> _____	<b>= \$</b> _____
<b>CHP Stall</b>	<b>\$50.00 ea</b> _____	<b>\$50.00 ea</b> _____	<b>= \$</b> _____
<b>Day Stall</b>	<b>\$115.00 ea</b> _____	<b>\$195.00 ea</b> _____	<b>= \$</b> _____
		<b>Total Amount Due</b>	<b>= \$</b> _____

**Please stall me with:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Complete stall payments MUST accompany stall reservation form. Absolutely no reservations without payment**

Method of Payment: US Funds, Check payable to PHBA  
Visa \* MasterCard \* Discover \* American Express  
(Fees above are discounted for cash or check paying customers)

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ SEC Code: \_\_\_\_\_

Name on Credit Card (Please Print) \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_