



Becky Hart – 3 Day Riding Clinic
May 31st, June 1st and June 2nd

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Clinic Options (Add \$25 to this option for entries received May 2nd or later):**

3 Days - \$325.00 ** Qty: _____

2 Days - \$250.00 Qty: _____

1 Day - \$125.00 Qty: _____

Total \$ _____

Auditor Options:

3 Days - \$75.00 Qty: _____

2 Days - \$50.00 Qty: _____

1 Day - \$25.00 Qty: _____

Total \$ _____

Grand Total \$ _____

Please make checks / money orders payable to **GCER**

Mail form and payment to:

GCER
PO Box 3412
Auburn, CA 95604