



THE

Friesian Horse

ASSOCIATION OF NORTH AMERICA



2010 FHANA Educational Clinic

REGISTRATION FORM

Clinic Date: April 24, 2010

Host Chapter: Ontario Friesian Horse Association

Contact: Jentje Steenbeek, E-mail: jentje@steenbeek.ca Cell: 519.440.6639

Location: Cupar Friesians, 593930 Hwy 59, Burgessville, Ontario, N0J 1C0

Clinic Registration Fees

_____ @ \$ 100.00 Current FHANA Member registering before April 9th

_____ @ \$ 150.00 Current FHANA Member registering after April 9th

_____ @ \$ 150.00 Non FHANA Member

TOTAL _____

Name _____ FHANA # _____

Address _____

City _____ STATE _____ ZIP CODE _____

EMAIL _____ PHONE _____

Names of additional auditor(s) registered:

Payment Information:

___ Check or Money Order in US Funds (*Payable to Friesian Horse Association of North America or FHANA*)

___ Please charge my credit card: Discover MasterCard Visa

Name on Card: _____

Card Number: _____

Expiration Date: _____ / _____

CVV2 _____ (*this is the 3 digit number on the back of MasterCard and Visa cards,
the last 3 digits on the back of Discover card,*)

Signature _____ *Date* _____