



Historic Prophetstown Clinics

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ email _____

Prices:

\$300 per participant

\$250 per participant if a member of Historic Prophetstown

Prices include dinner on Friday evening, all meals on Saturday, and breakfast and lunch on Sunday

Number of participants registering _____ Number of participants that are members _____

Payment:

Check made payable to Historic Prophetstown _____

Visa _____ MasterCard _____ Discover _____ American Express _____

Credit Card # _____ Expiration Date _____ V-code _____

The V-code is the three digit number on the back of the card in the signature area

Signature required for credit card authorization _____

Please indicate which workshop you are registering for:

Reproduction Clinics:

February 17, 18, and 19, 2012 _____

March 2, 3, and 4, 2012 _____

Draft Horse Clinics:

May 4, 5, and 6, 2012 _____

September 2, 3, and 4, 2011 _____

Advanced Clinic:

October 21, 22, and 23, 2011 _____

Forage Clinic:

July 29, 30, and 31, 2011 _____

Extension Workshop Days:

\$40 per participant

Mare Management: April 7, 2012 _____

Forage Days: July 30, 2011 _____

Please mail your registration with the payment to:

Historic Prophetstown

Attn: Melissa Brown

3549 Prophetstown Trail

PO Box 331

Battle Ground, IN 47920

Or you can call in to the office:

765-567-4700

Fax: 765-567-4736

All clinics are proudly sponsored by PEFCU

