

**Norwegian Fjord Horse Registry
2019 Educational Forum
Registration Form**



Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email: _____

Contact Person: _____

NFHR Member \$75 x _____ = _____ (number of member participants)

Non-Member \$100 x _____ = _____ (number of non-member participants)

Donation \$ _____ (I would like to donate to the costs of the Forum)

Total: \$ _____

Check enclosed _____ Visa _____ Mastercard _____ Send PayPal invoice to:
(email address) _____

Card Number: _____

Expiration Date: _____ Zip card is billed to: _____

Signature: _____

Names of additional registrants: _____
