



JOIN US FOR OUR 11TH ANNUAL BOWL-A-THON ON FEBRUARY 15TH, 2014

Horses with Heart (Hands-on Equine Assisted Riding Therapy) is a nonprofit dedicated to providing a safe and enjoyable equine experience for people with physical, mental and emotional disabilities.

- WHEN:** Saturday, February 15th, 2014
WHERE: Antelope Lanes ~ 6301 E. 2nd St., Prescott Valley
HOW: Check-in at 9:00 a.m.
Bowling from 10:00 a.m.—12:00 p.m.
(An Afternoon Session will be held only if Morning Session is filled by 1/24/14) Check-in at 12:00 pm and
Bowling from 12:30 p.m.—2:30 p.m.
COST: \$30 ea. person which includes 2 games, shoes and event T-Shirt
DETAILS: Space is limited to 5 people per lane on 24 lanes. We can help you form a team if you don't already have one. There will be two prize categories for the most money raised through pledges (18 yrs. old & younger and 19 yrs. old & above). There will be many Raffle items.

YOUR GOAL: Raise as much money as possible for Horses with Heart. Start collecting pledges now. Ask your family, friends and neighbors to make a pledge to partner with you to help pay for riding sessions to transform the lives of children, adults and Veterans in our Community.

The money raised will either support our riding programs or can be designated to a HwH rider. You may support a rider for any amount.

Lesson Fees are as follows (*subject to change*):

- ♥ \$35 per group lesson / \$40 private
- ♥ \$210 for one session (6 group lessons) / \$240 private
- ♥ \$420 for two sessions (12 group lessons) / \$480 private
- ♥ \$630 for three sessions (18 group lessons) / \$720 private
- ♥ \$840 for four sessions (24 group lessons—all year) / \$960 private

♥ If your rider participates in Special Olympics or in a Happy Trails Horse Experience, you may designate your pledge money to that fund in his/her name.

Note: If a rider, who has money designated toward his/her riding, does not show up for a scheduled lesson and the instructor was not notified 24 hours in advance, the rider's account will be charged. Any unused funds raised will go into the HwH General Fund at year end.

**All donations to Horses with H.E.A.R.T., Inc. and a portion of your bowler registration fee are tax deductible according to the Internal Revenue Service statutes for a 501 © (3) non-profit corporation. Horses with H.E.A.R.T., Inc. EIN 86-0735678.*



**PLAN TO PARTICIPATE WITH THE NONPROFIT
WITH HEART!**



Horses with HEART P.O. Box 2427 Chino Valley, AZ 86323

11th ANNUAL BOWL-A-THON
BOWLER REGISTRATION FORM

Please complete by **January 24th** and mail with payment to:
HwH Bowl-A-Thon, P.O. Box 2427, Chino Valley, AZ 86323
Please make checks payable to: **Horses with Heart**

Name: _____ Date: _____

Mailing Address: (Street, City, Zip): _____

Phone: _____ email: _____

Please Circle: Adult / Youth

Do you have a team of 5 people? Yes ____ No ____ (If no, we will be happy to place you on a team on the day of the event.)

Team Name: _____

Other People on your Team: *Note: If you have a team of 5 people, each person needs to submit their own registration form.

SESSION PREFERRED:

Circle one
⇒ Morning or Afternoon session preferred: (am / pm). (There will **ONLY** be a p.m. session if a.m. session is filled.)

EVENT T-SHIRTS: If registering to bowl, event T-shirts are included with registration fee.
(If January 24th registration deadline is not met, an event shirt cannot be guaranteed.)

⇒ Please indicate T-shirt size below.

Men's T-Shirt Size Circle one: YS S M L XL XXL XXXL

DONATION ONLY

I am not bowling and I would like to donate \$ _____

(Please make checks payable to Horses with Heart.)

Name: _____ Date: _____

Mailing Address: (Street, City, Zip): _____

Phone: _____ email: _____

Below asterisks for HwH use only.

Registration Fee Paid \$ _____ Check No. _____ Cash _____

Donation \$ _____ Check No. _____ Cash _____

Verified by _____



PLEDGE FORM

- ♥ Receipts for pledges (of \$10 or more) will be mailed after the event. Please make all checks payable to: **Horses with Heart.**
- ♥ Start collecting Pledges now. On the day of the event, please turn in the pledge money collected in the envelope provided. Designate the rider or program you wish to support (if not specified the funds will go toward the HwH General Operating Fund).

PLEDGE INFORMATION *Please print legibly.*

	Name	Pledge Amount	Check # or Cash
	Mailing Address		
	City, State, Zip		
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

DATE: _____

PAGE TOTAL COLLECTED \$ _____



THANK YOU FOR YOUR SUPPORT!
 “Where disabilities become possibilities”



*****Please use this form only. It may be duplicated for your use.
 Form is also available on website www.horseswithheart.org.*****



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	Name	Pledge Amount	Check # or Cash
	Mailing Address		
	City, State, Zip		
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

DATE: _____

PAGE TOTAL COLLECTED \$ _____

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