

THE CALIFORNIA STATE HORSEMEN'S ASSOCIATION CHARITABLE TRUST

DONATION FORM

IN MEMORY/HONOR OF _____, I HEREBY DONATE
\$_____ TO THE CALIFORNIA STATE HORSEMEN'S ASSOCIATION CHARITABLE TRUST FOR THE
FOLLOWING FUND AND/OR SCHOLARSHIP.

U.C. DAVIS VETERINARY SCHOLARSHIP FUND \$ _____
EQUINE MEDICAL RESEARCH FUND \$ _____
JUNIOR HORSEMASTERSHIP SCHOLARSHIP FUND \$ _____
SENIOR HORSEMASTERSHIP SCHOLARSHIP FUND \$ _____
ROYALTY SCHOLARSHIP FUND \$ _____
JUNIOR STOCK COMPETITION SCHOLARSHIP FUND \$ _____
ENGLISH SCHOLARSHIP FUND \$ _____
WESTERN SCHOLARSHIP FUND \$ _____
GYMKHANA SCHOLARSHIP FUND \$ _____
TRAIL TRIAL SCHOLARSHIP FUND \$ _____
EMERGENCY EQUINE ASSISTANCE FUND \$ _____
APPLY TO BEST USE (determined by Trust) \$ _____

MAKE CHECKS PAYABLE TO:

CALIFORNIA STATE HORSEMEN'S ASSOCIATION CHARITABLE TRUST

MAIL TO:

CALIFORNIA STATE HORSEMEN'S ASSOCIATION CHARITABLE TRUST
1330 W. ROBINHOOD DR #D STOCKTON, CA 95207

YOUR NAME _____

ADDRESS _____

PHONE # (IN CASE OF QUESTIONS) _____

CITY

STATE

ZIP

ENCLOSE THIS FORM WITH YOUR CHECK

With a donation of \$25.00 or more an acknowledgement will be sent if you provide the following information:

Name of person to receive acknowledgement: _____

Complete mailing address: _____

CITY

STATE

ZIP

CSHA Charitable Trust, 1330 W. Robinhood Dr. #D, Stockton, CA 95207