



**JOIN US FOR OUR
14th ANNUAL BOWL-A-THON
ON FEBRUARY 11, 2017**
Antelope Lanes, 6301 E. 2nd St., Prescott Valley

The cost is \$30 per person
This includes 2 games, shoes, and event T-Shirt

Check-in time is 9:00 a.m. if you are bowling from 10 a.m. to Noon

There will be P.M. session only if A.M. is filled.

(Check-in at noon, if you are bowling from 12:30 p.m. to 2:30 p.m.)

There are 24 lanes available and Space is limited to 4 people per lane.
(if you don't have a team, we will help you form one.)

RAFFLES:

40" TV

50/50

QUILT

**GIFT BASKETS
& MORE!**

****NEW PRIZES****

Top Three Pledge Collectors

Three Strikes in a Game, Three Gutter Balls in a row

Door prizes throughout the bowling session!

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 HWH to help transform the lives of children, adults and Veterans in our community. The money raised will support our riding programs through our **Scholarship Fund**.

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

- ♥ \$45 per group lesson / \$60 private
- ♥ \$270 for one session (6 group lessons) / \$360 private
- ♥ \$540 for two sessions (12 group lessons) / \$720 private
- ♥ \$810 for three sessions (18 group lessons) / \$1080 private

Special Olympics Fund

- ♥ \$400 per session / \$800 per year (2 sessions per year)

Happy Trails Horse Experience Fund

- ♥ \$60 per day / \$150 per three-day experience (Happy Trails is offered for 2 three-day sessions)

THE MISSION OF HORSES WITH HEART

To provide a safe, therapeutic equine experience provided by our credentialed staff for people with disabilities. This fosters their confidence and dignity while challenging each rider to develop independent skills at their own level of ability.

**All donations to Horses with H.E.A.R.T., Inc. (EIN 89-0735678) and a portion of your bowler registration fee are tax deductible according to the Internal Revenue Service statutes for a 501(c)(3) non-profit corporation.*



PLAN TO PARTICIPATE WITH THE NONPROFIT WITH HEART!



Horses with Heart

P.O. Box 2427

Chino Valley, AZ 86323



14th ANNUAL BOWL-A-THON BOWLER REGISTRATION FORM



Please complete and mail by **January 21, 2017**
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 4 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: **Each person needs to submit his/her own registration form.**

SESSION PREFERRED:

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

EVENT T-SHIRTS: If registering to bowl, event T-shirts are included with registration fee.
(If January 21st registration deadline is not met, an event shirt cannot be guaranteed.)

⇒ Please circle T-shirt size :

Circle one: Youth S Men's T-Shirt Size: 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: _____

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. Designate the fund you wish to support – e.g., *Scholarship Fund* (if not specified the funds will go toward *the HwH General Operating Fund*).

PLEDGE INFORMATION **Please print legibly**

	Name _____ Mailing Address _____ City, State, Zip _____	Pledge Amount	Check # Or Cash
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.hwonline.org*****



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