

**Flanagan Stables**  
**Facility Rental Application**  
www.flanaganstables.com  
1818 Flanagan Dr.  
Christiansburg, VA 24073  
540-382-7071

\*Please fill out application completely. Deposit must be received to reserve facility. If you have any questions please call 540-382-7071

Name of Organization: \_\_\_\_\_

Event/Show Contact Person: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Alternate #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/state/zip: \_\_\_\_\_

Type of Event: \_\_\_\_\_ One Day Show: \$250 \_\_\_\_\_ Two Day Show: \$325 \_\_\_\_\_ Clinic \$150/Day

Details: \_\_\_\_\_

Date Choice #1: \_\_\_\_\_ Date Choice #2: \_\_\_\_\_ Date Choice #3: \_\_\_\_\_

Estimated # of participants/competitors: \_\_\_\_\_ estimated # of spectators: \_\_\_\_\_

1. **Insurance:** please contact us at [flanaganstables1@gmail.com](mailto:flanaganstables1@gmail.com) or 540-382-7071 with your organization/clinic instructor's insurance information. This information must be received to receive approval for facility rental.
2. **Deposit:** we require a \$50 deposit for show rental and a \$25 deposit for clinic rental. The deposit is 100% refundable if cancelation is received 30 days or more and the facility is re-rented. It is 50% refundable if facility is not re-rented. The deposit can accompany your application and must be received to reserve a date for facility rental.
3. **Flanagan Stables reserves the right to require staff supervision, extra Porto Johns and/or security for your event. This will depend on site and type of activity; you may be responsible for any direct expenses the facility incurs as a result.**
4. **SUBMISSION OF THIS APPLICATION DOES NOT CONSITUTE APPROVAL**
5. **Equine Event Report (Coggins):** it is the responsibility of the event coordinator to make sure the Equine Event Report is filed with the Virginia Department of Agriculture and Consumer Services in Wytheville.
6. **Managers Guide:** upon receipt of the proof of insurance the event contact person will be sent the managers guide for Flanagan Stables facility rental.
7. **Checks for payment should be made out to Flanagan Stables.**

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_