

**Ozarks Horse Exchange
Ad Order Form For Events:**

Please fill out this form and mail it to our office with your photos and payment.
The lines with * are required.

* Contact Name: _____

* Phone Number: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

URL: _____

* Event Date(s): _____

Mapping Address: _____

Mapping City: _____ State: _____ Zip: _____

* Ad Description: _____

Number of Pictures (5 max): _____ x \$5.00 each = _____

GRAND TOTAL: \$ _____