

**Client Detail Form – Idaho Paint & Zone One/INPHC shows  
TRAINER STALL ASSIGNMENTS & CC INFO**

Stall Location \_\_\_\_\_  
PLEASE ASSIGN SPECIFIC STALL(S) TO EACH CLIENT

**The following clients will be financially responsible for the following stalls:**

NAME ON CARD: \_\_\_\_\_

CARD #: \_\_\_\_\_ 3-DIGIT CODE \_\_\_\_\_ EXP DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY AND ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STALL(S) # ASSIGNED: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CARD #: \_\_\_\_\_ 3-DIGIT CODE \_\_\_\_\_ EXP DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY AND ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STALL(S) # ASSIGNED: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CARD #: \_\_\_\_\_ 3-DIGIT CODE \_\_\_\_\_ EXP DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY AND ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STALL(S) # ASSIGNED: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CARD #: \_\_\_\_\_ 3-DIGIT CODE \_\_\_\_\_ EXP DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY AND ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STALL(S) # ASSIGNED: \_\_\_\_\_

**Please return this form no later than July 31<sup>st</sup> if the person making the original reservation is not the one paying for those reserved stalls & RVs.**

**Form can be faxed or emailed to [louri.grover@spectrarp.com](mailto:louri.grover@spectrarp.com) or 208-442-3312.**