



# 2025 U.S. Nationals Sponsorship Form

## Arabian & Half-Arabian Championship Horse Show

### Expo Square, Tulsa, OK

#### Class Sponsorship - \$300

- Inclusion in the U.S. Nationals Show Program
- Recognition through Center Ring announcements

1<sup>st</sup> Choice Class # \_\_\_\_\_ Class Name \_\_\_\_\_

2<sup>nd</sup> Choice Class # \_\_\_\_\_ Class Name \_\_\_\_\_

**Jumbotron Ad Sponsorship (60 second) - \$800** Ad needs to be provided no later than August 30<sup>th</sup>

**Show Program Ad Sponsorship- \$600 Full Page    \$325 Half Page    \$1175 2-Page Spread**  
Ad(s) needs to be provided no later than August 30<sup>th</sup>

**Farm Flag Sponsorship - \$750 NEW    \$225 RETURN (if no art change)**

Artwork/Logo needs to be provided no later than August 30<sup>th</sup>

Ford Truck

Mustang

Pavilion

**Arena Sign- \$750    \$1100 for 2**

Includes one (1) 4 X 4 arena sign. Please specify which arena. Logo must be received by the AHA office no later than September 1<sup>st</sup>.

Ford Truck

Mustang

Pavilion

Enclosed is a:

**Total Paid= \$ \_\_\_\_\_**

**Sponsorships are non-refundable. All Sponsorships are due by August 30<sup>th</sup> in order to be included in Show Program.**

Sponsor Name (*this name will be used as the sponsors name*) \_\_\_\_\_

Contact/Owner Name \_\_\_\_\_ AHA Membership # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Zip/Postal \_\_\_\_\_

Home # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contributions or gifts to AHA are not tax deductible as charitable contributions. However, they may be deductible as ordinary and necessary business expenses if so advised by appropriate tax counsel.

#### Method Of Payment (US Funds Only)

A fee of up to 3% may be assessed to cover the cost of acceptance for electronic payments. This fee is not applicable if the payment is by cash, check, money order or ACH.

Check (Payable to AHA) Check # \_\_\_\_\_  ACH  Credit Card **Total Amount Due \$ \_\_\_\_\_**

**ACH Information:** Account Type:  Savings  Checking **Bank Routing #:** \_\_\_\_\_ **Bank Acct #:** \_\_\_\_\_

**Credit Card#** \_\_\_\_\_ \$ \_\_\_\_\_

Print Name as it appears on CC Name: \_\_\_\_\_

Exp Date \_\_\_\_\_ CVV \_\_\_\_\_ Signature \_\_\_\_\_

Credit Card Billing Address (include zip) \_\_\_\_\_