

IMBA Region IV Open Pleasure Show

SPONSORSHIP FORM

Class Sponsorships: \$25.00 per class \$50.00 per High Point
(\$5.00 coupon value) (\$10.00 coupon value)

Sponsor Name: _____

Farm/Business Name: _____

Address: _____

Phone: _____

Sponsor will have your name announced at the show and there will be a table near the show office to hand out your literature. Your name will also be listed in any articles about the show.

Class Name

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Name of Person to receive coupon toward show entries: _____

(Coupons can be picked up at the show office.)

Make checks payable to: IMBA

Mail To: IMBA Show c/o Linda Konichek S.101 W.34628 Hwy LO Eagle, WI 53119

RAINBOW MEMORIAL SPONSORSHIP FORM

Class Sponsorships: \$25.00 per class \$50.00 per High Point
(\$5.00 coupon value) (\$10.00 coupon value)

Memorial Person or Horse Name: _____

Sponsor Name: _____

Address: _____

Phone: _____

You will have your photo displayed at a table near the show office. The person/horse name will be announced at the show. Your photo and information will be in any articles about the show.

Class Name

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Name of Person to receive coupon toward show entries: _____

(Coupons can be picked up at the show office.)

To have your photo returned please include a S.A.S.E.

Make checks payable to: IMBA

Mail To: IMBA Show c/o Linda Konichek S.101 W.34628 Hwy LO Eagle, WI 53119