



IMBA REGION IV OPEN PLEASURE SHOW

SPONSORSHIP FORM

Class Sponsorships: \$25.00 per class \$50.00 per High Point

You 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.

Sponsor Name: _____

Farm/Business Name: _____

Address: _____

Phone: _____

The class I would like to Sponsor:

1st Choice: _____

2nd Choice: _____

Make Checks payable to: IMBA Region 4
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

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

Memorial Person or Horse Name: _____

Sponsor Name: _____

Address: _____

Phone: _____

The class I would like to Sponsor:

1st Choice: _____

2nd Choice: _____

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