



Southeast Horse Shows

Sponsorship Opportunities

Class Sponsorships

Individual Class Sponsor (per show).....\$30
 *"sponsored by" .n the class title in show progra
 *Choose from 10 individual shows
 *Listing on sponsorship page in progr:
 *PA Announcements

Show Series Class Sponsor.....\$250
 *"sponsored by" in class title in all 10 show progra
 *Listing on sponsorship page in all 10 show progra
 * 1/4 page ad in all 10 show programs
 * PA Announcement
 * Link on Southeast Horse Shows web page

GOLD MEDAL Sponsorships

Show Series GOLD Sponsor.....\$1,000
 *Listing on sponsorship page in progr:
 *PA Announcements
 *Link on SEHS web page
 *4 posts per month on SEHS facebook page
 *Full page ad in all 10 show programs

Random Sponsorships

Show Series Awards Sponsor.....\$500
 *Listing on sponsorship page in progr:
 *PA Announcements
 *Link on SEHS web page
 * 1 post per month on SEHS facebook page
 *1/2 page ad in all 10 show programs

Hospitality Sponsors\$35 per show
 (Helps offset expanse of Show officials welcome bag)
 *Opportunity to include your company name or product in bag
 *Listing on sponsorship page in progr:
 * PA Announcements

Bridle Numbers Sponsor.....\$500 (SOLD TO ECKROTH DRESSAGE)
 *Logo and name on all Bridle numbers for 10 shows
 *Listing on sponsorship page in progr:
 *PA Announcements
 *Link on SEHS web page
 * 1 post per month on SEHS facebook page
 *1/4 page ad in all 10 show programs
 *sponsor listing on SEHS T-shirts

Sponsorships (please circle one)	Individual Class \$30	Series Class \$250
	Hospitality \$35	Bridle Number \$500 Series Gold \$1000
Sponsor Name: _____ Sponsor phone: _____		
Address: _____ Email: _____		
If Individual Class or Hospitality Sponsor-name show and &/or class _____		
If Class Sponsor-name class _____		
How you would like Sponsor Title to read: _____		

Make Checks payable to SEHS and mail to 22806 W. Newberry Rd., Newberry, FL 32669 or fill out Credit Card Information

VISA AMEX	CARD NO. _____	EXP DATE _____
MasterCard Discover	NAME ON CARD: _____	CVV # _____
BILLING ADDRESS _____		ZIP CODE _____