



ARABIAN HORSE ASSOCIATIONSM

10805 East Bethany Drive | Phone 303-696-4500
Aurora, Colorado 80014 | Fax 303-696-4599
www.ArabianHorses.org | info@ArabianHorses.org

**2018 AHA U.S. NATIONAL CHAMPIONSHIP HORSE SHOW
RESERVED PAVILION TABLES**

October 19-27, 2018 Tulsa, Oklahoma

- For 2018, you will receive one table set inside the arena that sits 8 people. The tables are set on the West side of the arena.
- Priority for 2018 tables will be given to farms and individuals who had table(s) in 2016. Tables will then be sold on a first come, first served basis to farms and individuals on the previously established waiting list.
- Bar and waitress service will be available.
- In order to reserve a pavilion table, signee must be a patron.
- Reserved tables will be made available the final 3 afternoon and evening sessions of the show in Ford Truck Arena, in the lower level of the Patron Lounge.
- 8 Meal tickets (per table) for the final 3 afternoon and evening will be made available for the Patron Lounge in Ford Truck Arena.
- Beginning with the first session of halter classes, coffee, water and orange juice will be at your table for morning sessions as well as muffins and assorted breakfast breads. In the afternoons; iced tea, lemonade and water will be available at your table in addition to appetizers. A cocktail waitress will be available to take bar drink orders.
- The submission of this form constitutes an agreement by the signing party for the purchase of a pavilion table. If you cancel this pavilion table prior to May 1, 2018, you will not be invoiced. If cancelled May 2 until close of entries, a \$500 fee will be owed. If cancelled after the close of entries until the start of the show, payment of 50%of the pavilion table price will be paid.
- **2018 pricing is \$3,500 per table.**

There are only 16 tables available in 2018, so book soon to take advantage of this amazing opportunity!

Event Sales Contact Info:

Phone: 303-696-4541

Email: kelsey.berglund@arabianhorses.org

Or fax this form to: 303-696-4599

Patron/ Company Name _____
(This is the name that will appear in publicity)

Contact Name _____

Address _____ E-Mail _____

City _____ State/Prov. _____ Zip/Postal _____

Home # _____ Cell # _____ Fax # _____

Method of Payment (U.S. Funds Only):		Total Amount Due _____
<input type="checkbox"/> Check Enclosed/Payable to AHA SM – Check # _____	<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AmEx <input type="checkbox"/> Discover Expiration Date _____	
_____	_____	
Credit Card Number	Print Name (as it appears on credit card)	
_____	_____	
Cardholder's Signature	Credit Card Holder's Billing Address (Street, City, State, Zip/Postal Code) (Mandatory)	
_____	_____	