



Sport Horse Nationals Patron Form

September 6-12, 2026

World Equestrian Center, Wilmington, OH

Patrons Open April 1 2026, 9 AM MT

Platinum Patronship Package- \$1800 total = \$ _____

- FIRST Priority Stabling (based off of Seniority)
- Special Platinum Level Gift
- Golf Cart
- Custom Breakfast Box to be delivered at the beginning of the show
- Sponsorship of two Champion classes
- Recognition through center ring announcements and in the Official Show Program
- 1 4X4 Arena sign in Arena selected by sponsor below (need high resolution logo emailed)

Dressage Arena **Hunter/Jumper Arena** **SHIH/SHUS/Driving Arena**

Gold Patronship Package – \$1500 total = \$ _____

Everything Included in the Elite Package Plus

- SECONDARY Priority Stabling (based off of Seniority)
- 1 4X4 Arena sign in Arena selected by sponsor below (need high resolution logo emailed)

Dressage Arena **Hunter/Jumper Arena** **SHIH/SHUS/Driving Arena**

Elite Sponsorship Package – \$1100 total = \$ _____

- Preferred Stabling after Platinum & Gold Stabling
- Golf Cart
- Custom Breakfast Box to be delivered at the beginning of the show
- Sponsorship of two Champion classes
- Recognition through center ring announcements and in the Official Show Program
- Specially selected gift

Paddock Addition - \$600 (Limited to 15 Spots- First Come First Serve)total=\$ _____

- Open to Platinum, Gold & Elite; you will be sent confirmation if you received a paddock or if you are waitlisted

Total Due = \$ _____

*** Deadline to enroll as Patron with fees paid in full to receive stalling preference is prior to the close of entries for SHN.**

*****Submission of a signed patronship form constitutes agreement by signing party for payment of patronship. You are also bound by the rules that can be modified at any time*****

Sponsorship Information

First Choice Class# _____ Class Name _____

Second Choice Class# _____ Class Name _____

Sponsor Name *(this name will be used as the published name)* _____

Contact Name _____ AHA Account # to Bill _____

Trainer _____ Phone # _____ Email _____

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.			
<input type="checkbox"/> Check (Payable to AHA) Check # _____	<input type="checkbox"/> ACH	<input type="checkbox"/> Credit Card	Total Amount Due \$ _____
ACH Information: Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Checking		Bank Routing #:	Bank Acct #:
Credit Card#			\$
Print Name as it appears on CC or ACH	Name:		
Exp Date	CVV	Signature	
CC or ACH Billing Address (include zip)			

