



2021 U.S. Nationals Patron Form

Patronship – Package 1 – \$3,800 \$ _____

- Four Patron pins allowing access to the Patron’s Lounge
- Four Meal Tickets for breakfast, lunch and dinner served in the Patron’s Lounge
- Four Patron Seating for Finals Night
- Preferred Stalling (Patron stalling assigned prior to all others)
- *Rental Car OR Golf Cart for the duration of the show with exclusive parking*
- Class Final or Semi-Final award presentation opportunity in Center Ring
- Recognition through center ring announcements and in the Official Show Program
- Specially selected gift package

Additional Meal Tickets - Only available with Package 1 @ \$850 \$ _____

- Two Patron Pins & Two Meal Tickets for breakfast, lunch and dinner served in the Patron’s Lounge

Please Choose One (for Patron Package #1):

Golf Cart Rental Car *(if you do not make a selection, a golf cart will be assigned)*

If you would like both check here and include an additional \$500 \$ _____

Package 1 Total \$ _____

Patronship – Package 2 - \$1,750 **Package 2 Total \$ _____**

- **This package does NOT include preferred stalling**
- Two Patron Pins allowing access to the Patron’s Lounge
- Two Meal Tickets for breakfast, lunch and dinner served in the Patron’s Lounge
- Two Patron Seating tickets allowing admission to all sessions for entire show in arena of your choice
- Golf Cart

Enclosed is: \$ _____

Full payment \$500 minimum payment – **NON-REFUNDABLE** (remaining balance due by close of entries)

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

*****Signature** _____

*****Submission of a signed patronship form constitutes agreement by signing party for a payment for patronship, of which 50% is nonrefundable if canceled after the close of show entries.**

Sponsorship Information for Patron Package 1

First Choice Class# _____ Class Name _____

Second Choice Class# _____ Class Name _____

Third Choice Class# _____ Class Name _____

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

Contact Name _____ AHA Account # to Bill _____

Phone # _____ Email _____

Method Of Payment (US Funds Only)

"Effective June 1, 2019, a required 3% Convenience Fee will be added by AHA to payments made by Credit Card. A Convenience Fee charge does not apply if the customer submits payment by check or money order."

Credit Card Check Enclosed Payable to AHA Check # _____

Credit Card# _____ \$ _____

Print Name as it appears on CC _____

Exp Date CVS Signature

Credit Card Billing Address (include zip) _____

