



# 2026 U.S. Nationals Sponsorship Form

## Arabian & Half-Arabian Championship Horse Show

Expo Square, Tulsa, OK

**Class Sponsorship - \$300**

- Inclusion in the U.S. Nationals Show Program
- Recognition through Center Ring announcements

1<sup>st</sup> Choice Class # \_\_\_\_\_ Class Name \_\_\_\_\_

2<sup>nd</sup> Choice Class # \_\_\_\_\_ Class Name \_\_\_\_\_

**Jumbotron Ad Sponsorship (60 second) - \$700** Ad needs to be provided no later than September 14<sup>th</sup>

**Show Program Ad Sponsorship-**  \$600 Full Page     \$325 Half Page     \$1175 2-Page Spread Ad(s)  
needs to be provided no later than August 30<sup>th</sup>

**Farm Flag Sponsorship -**  \$750 NEW     \$200 RETURN (if no art change)

Artwork/Logo needs to be provided no later than August 30<sup>th</sup>

- Ford Truck                       Mustang                       Pavilion

**Arena Sign-**  \$750- Pavilion or Mutang     \$400- Ford Truck (Arena Railing)

Includes one (1) 4 X 4 arena sign. Please specify which arena. Logo must be received by the AHA office no later than September 14<sup>th</sup>.

- Ford Truck                       Mustang                       Pavilion

Enclosed is a: \_\_\_\_\_ Total Paid= \$ \_\_\_\_\_

**Sponsorships are non-refundable. All Sponsorships are due by August 30<sup>th</sup> in order to be included in Show Program.**

Sponsor Name *(this name will be used as the sponsors name)* \_\_\_\_\_

Contact/Owner Name \_\_\_\_\_ AHA Membership # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Zip/Postal \_\_\_\_\_

Home # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contributions or gifts to AHA are not tax deductible as charitable contributions. However, they may be deductible as ordinary and necessary business expenses if so advised by appropriate tax counsel.

<b>Method Of Payment</b> (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 \$ _____
<b>ACH Information:</b> 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 _____	
Exp Date _____	CVV _____ Signature _____
Billing Address (include zip) _____	