Youth Member Name: _____

Sponsorship Form

SNEHA Youth Team

Open Horse Show August 13th 2006 Falls Creek Farm Oneco, CT

Donor Information (please print or type)

Name:	
Billing address:	
City, State Zip:	
Telephone:	( )

Sponsor Information

____	Full Page Ad* (5 ½ X 8 ½)	$40.00
____	Half Page* (4 ¼ X 5 ½)	$20.00
____	Quarter Page /Business Card* (4 ¼ X 2 ¾)	$10.00
____	Listing only or message up to 20 words	$5.00

____ Raffle Donation (Minimum value $10 includes business card ad)

Item: _____ Value $_____

** Photo ready ads must be attached or sent via e-mail*

Sponsorships must be returned no later than 7/25/06 to be included in the program!

Total Sponsorships amount $_____

____ cash ____ check # _____

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

____ I (we) wish to have our gift remain anonymous.

Signature(s):
Date:

Please make checks payable to: **SNEHA Youth Team**

Mail To: Karen Wanat 35 Long Crossing Rd. East Hampton, CT 06424 2Jaded@sbcglobal.net

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Please detach and retain for your tax records:

SNEHA Youth Team Donation receipt **Youth Team Open Horse Show August 13th 2006**

$_____ Date: _____

www.snehassociation.com