



Produced by the Arabian Horse Breeders Alliance

- April 11-14, 2019 -

Platinum Patron Sponsorship Package

\$10,000

- Major Breeding and/or In-Hand Championship sponsor
(available on a first come-first serve basis)
- Exclusive VIP TABLE (6-8 people)
(Tables are assigned based on date sponsorship form is received.)
- Advertising in the official show program (2 - full color pages)*
(camera ready art due March 15th)
- Listing in show program as premium donor and Breeding and/or In-Hand Championship sponsor
- Advertisement on large screen in the arena during show*
(Deadline April 1st)
- Publicity stand and banner at the entrance to the show*
(Camera ready art due March 1st)
- Banner space in the arena during the show
- Repeated publicity over the loudspeaker during the event*
- Option to display brochures on all VIP tables
- Banner on Arabian Breeders World Cup website with link to your website*
(Due April 1st)
- 6 Official collectors show programs
- 1 10x10 space on concourse
(Optional: commercial exhibit package. Fill out and return to Phyllis LaMalfa)

**Please contact AHBA for specific advertising deadlines.*

Deposit of \$1,000 due with submission of sponsorship form.

This will reserve your VIP table. Non-refundable.

Sponsorships must be paid in full by March 1st, 2019

Payment plans available please contact us for details.

Platinum Patron Sponsor Information:

Please fill out information exactly as you would like it to appear in all World Cup advertising.

Farm/Business Name: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____ Country _____

Phone: (____) _____ Mobile: (____) _____ Fax: (____) _____

E-mail: _____

Web Address: _____

Championship Class 1st choice _____

Championship Class 2nd choice _____

*Will you need a VIP table: Yes _____ No _____

Payment Information:

(Deposit of \$1,000 due upon submission of sponsorship form. Full sponsorship balance due March 1st)

Deposit (\$1,000) Full Payment (\$10,000) Other amount _____

I authorize AHBA to charge the following account:

Credit card number: _____ Expiration date: _____ Code _____

Name on card: _____

Signature: _____

Please make checks payable to: A.H.B.A.

Mail to: AHBA, 28150 N. Alma School Pkwy Ste. 103-474, Scottsdale, AZ 85262