



**GELDING CLINIC
SPONSORSHIP FORM**

Thank you for your interest to support our next gelding clinic! This form will help us obtain the appropriate information regarding your sponsorship.

This is for a(n) Individual Sponsorship (\$50 and up)
 Business Sponsorship (\$100 and up)
 Corporate Sponsorship (\$200 and up)

Sponsorship Amount: \$ _____

Check enclosed.
 Payment made online through PayPal date _____.

Contact Person: _____

Organization: _____

Phone: _____ FAX: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

* Please list sponsor name as you would like to see it printed in any print/on-line media:

To ensure recognition in clinic promotional materials, please return a signed copy of this form along with your payment as soon as possible to:

Northwest Equine Stewardship Center

PO Box 1324 • Monroe, WA 98272

* Please note on your check: Gelding Clinic Sponsorship*

If you would like a receipt, please check here.

Signature: _____ Date: _____

* Please note that you cannot save this document, please either print this for your records or email the completed form to yourself for electronic filing.

Northwest Equine Stewardship Center (NWESC) appreciates your financial support and partnership at any level. All sponsors will be recognized!
NWESC is a 501c3 non-profit organization.