



WWSA Attn: Shaun Mason, Sponsorship Coordinator  
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# 2024 BUSINESS SPONSORSHIP FORM

DATE: \_\_\_\_\_

*Sponsorship: (circle one please)*

<b>Premier</b>	<b>Elite Sponsor</b>	<b>Gold Sponsor</b>	<b>Silver Sponsor</b>	<b>Bronze</b>
<b>\$1000</b>	<b>\$500</b>	<b>\$300</b>	<b>\$200</b>	<b>\$100</b>

WWSA CONTACT MEMBER _____ SPONSOR'S NAME: _____ CONTACT PERSON: _____ PHONE # _____ BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ EMAIL: _____ WEB SITE: _____
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**LOGO**

(EXACTLY AS YOU WANT ADVERTISED) CAN ATTACH BUSINESS CARD OR COMPANY LETTERHEAD FOR CONVENIENCE

PAID BY: CASH: \$ \_\_\_\_\_ OR CHECK \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

Date Received: \_\_\_\_\_

\_\_\_\_\_  
Sponsor signature Date

\_\_\_\_\_  
WWSA Member Signature Date

\_\_\_\_\_  
WWSA Treasurer: \_\_\_\_\_ Date

**Use of this form for any purpose other than the gathering of sponsorship donations for Westark Horse Show Association will be considered fraud and the person or persons responsible for such misuse will be subject to criminal prosecution. DUE @ LAST SHOW!!!!!!**