



ARABIAN HORSE ASSOCIATION
COLORADO • EL PASO • KANSAS • NEBRASKA • NEW MEXICO

REGION 8 PATRON REQUEST FORM

Farm name: _____

Contact person: _____

Address: _____

Phone: _____

Number of stalls requested: _____

Location of stalls requested: _____

Previous Patron: _____ New Patron: _____

Class sponsorship request:

1st choice _____

2nd choice _____

3rd choice _____

Make check payable to Region 8 Championship Show

Credit card Information:

Visa/MC/_____

Card No. _____

Expiration date _____

Name on card _____

Signature _____

Amount paid \$ _____