



CLASS SPONSORS FORM

Fun Show

September 25, 2021

		DATE:
SPONSOR'S NAME:		CHECK IF NEW: <input type="checkbox"/>
ADDRESS:		PHONE:
CONTACT:		EMAIL:
AD SIZE: <input type="checkbox"/> 1/4 Page \$ n/a <input type="checkbox"/> 1/3 Page \$ n/a <input type="checkbox"/> 1/2 Page \$ n/a <input type="checkbox"/> Full Page \$ n/a		
SPONSORSHIP: <input type="checkbox"/> Class \$25 <input type="checkbox"/> Championship Class \$ n/a		
PAYMENT: <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Bill		
COMMENTS:		

ATTACH PAYMENT, IF APPLICABLE



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