



LAST CHANCE SHOW

AUGUST 16th, 2025

VIP TABLE/ CLASS SPONSORSHIP REQUEST FORM

VERBAL REQUESTS WILL NOT BE ACCEPTED!

All Sponsorship requests must include payment in full and are non-refundable

Requests must be accompanied with credit card authorization

Table Location will be based on the 1. Sponsor 2. Order that reservation has been received and paid

RESERVATION UNDER: _____

() VIP TABLE _____ @ \$250.00 = \$ _____

() CLASS SPONSORSHIP _____ @ \$20.00 = \$ _____

() CHAMPIONSHIP SPONSORSHIP _____ @ \$35.00 = \$ _____

SPECIAL REQUESTS: _____

****Special Requests cannot be guaranteed****

CREDIT CARD AUTHORIZATION

Master Card () Visa () American Express () Discover ()

Account # _____ Exp. Date _____ CVV# _____

Name on Credit Card: _____

Address: _____ City: _____

State _____ Zip Code _____

Home Telephone # _____ Mobile # _____

Email: _____

I, we hereby authorize Ocala Paso Fino Horse Association to charge my above referenced credit card account the total amount of \$ _____

Signature _____ Date _____

Please note that credit cards will be charged upon receipt of this form.

E-mail this form to: ocalapfhashows@gmail.com

4% processing fee will be added to all credit card transactions.