

Illinois Quarter Horse
Youth Association

SPONSORSHIP FORM

Sponsors Information:

Name _____ Phone _____

Address _____

City _____ State ____ Zip _____

I, _____ agree to sponsor
_____ with _____ sponsorships at \$25.00 each.
Enclosed is a check for the amount of \$ _____.

Name of child sponsoring: _____

Make payable to ILQHYA.

YWS Sponsorships must be postmarked on or before May 1, 2018.

NYATT Sponsorships must be postmarked on or before June 1, 2018.

Please send to:

Brad Kearns
PO Box 7076
Grayslake, IL 60030

Phone: 847-343-3497
Email: bradkearns@aol.com

Thank You! Thank You! Thank You! Thank You! Thank You! Thank You!

