



Show Program Advertising Form

Company OR Personal Name _____

Contact person (if different from above) _____

Stlhorseshow.com

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax # _____ E-mail _____

Four-color program. Space reservations due Aug. 15. Program ads must be submitted no later than Aug. 20, 2024. Submit ads as a PDF or JPEG to: lisamills211@gmail.com

_____ \$500 – Back Cover **SOLD!** _____ \$150 – Half Page (8.5" x 5.5")

_____ \$500 – Inside Front or Back Cover (8.5" x 11")

_____ \$600 – Two Page Center Spread (17" x 11")

_____ \$300 – Full Page (8.5" x 11")

Method of payment – (Gifts are tax deductible according to the amount allowed by law)

_____ **A check** is enclosed made payable to **St Louis National Charity Horse Show**

Please mail check to: 1 Chabanel Drive, Defiance, MO 63341

_____ **Credit card payment**

Credit Card # _____

___ MC ___ Visa Exp. Date _____ Security Code _____

Name as it appears on the card: _____

Signature: _____

Mail form with credit card information to: 1 Chabanel Drive Defiance MO 63341