



## Sponsorships & Extravaganza tickets Reservation Form

*Please fill out information exactly as you like it to appear in all Egyptian Breeders Classic Advertising*

Farm/Business Name: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Country: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

### Sponsorship Selection

Premium: ☐ ☐ \$5,000 – Full Payment ☐ \$1000 Deposit Required ☐ Partial Payment \$ \_\_\_\_\_

Gold: ☐ ☐ \$2,500 – Full Payment ☐ \$1000 Deposit Required ☐ Partial Payment \$ \_\_\_\_\_

Silver: ☐ ☐ \$1,500 – Full Payment ☐ \$1000 Deposit Required ☐ Partial Payment \$ \_\_\_\_\_

Chair: ☐ ☐ \$300 – Full Payment

Class Sponsorship 1<sup>st</sup> Choice \_\_\_\_\_

Class Sponsorship 2<sup>nd</sup> Choice \_\_\_\_\_

☐ Number of tickets

### Payment Information

*I authorize EBC to charge the following account:*

Credit Card Number: \_\_\_\_\_

Expire Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please make checks payable to: Egyptian Breeders Classic**  
**Mail to: Phyllis LaMalfa - EBC, 1692 Mangrove Ave #404, Chico, CA 95926**