

Charleston Area Therapeutic Riding

Event: CATR Spring Horse Show 2017

Location: Charleston Area Therapeutic Riding

Date: Saturday, May 13th

Time: 8:00 AM - 1:00 PM

Sponsor: \$25/class

Name: _____

Class Sponsorship(s): _____

Donated by: _____

Verified by: _____

All donations are tax deductible under 501(c)(3)

Retain top portion for your records. CATR will send a letter of receipt for tax purposes.

Return bottom portion to CATR

Class Sponsorship(s): _____

Total \$: _____

Sponsor Name (as it should appear): _____

In Honor of: _____

In Memory of: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Thank you for your generous support!

Please make all checks payable to CATR.

Please return form with payment to CATR:

Charleston Area Therapeutic Riding

2269 Hamilton Rd

Johns Island, SC 29455

