

## NIGHT AT THE RACES - Friday, June 28, 2019

NAME (print clearly)					
PHONE	EI	EMAIL			
ADDRESS	CITY_		STATE	ZIP	
I wish to purchase ticket(	(s) for the event X \$	325 per pe	rson = \$		
I wish to sponsor horse	(s) X \$40 per horse	e = \$	(Do not have to a	ttend to sponsor a horse)	
#I Horse name	#2	#2 Horse name			
#3 Horse name	#4 Horse name				
<b>Sport</b> I wish my sponsorship to s	upport:				
<ul> <li>Inclusion of your nation</li> <li>Inclusion of your nation</li> <li>"Naming rights" to</li> <li>Two tickets to the</li> <li>I wish to purchase an Empe</li> <li>Name/Company for Banner and Prog</li> <li>Horse Name</li> </ul>	ame within the event a horse in a race the event eror Penguin spongram:	ings progr at evening sorship for	am; ;; and - \$300		
Method of Payment					
Check enclosed, payable to THE PEN	NGUIN CLUB for \$_				
I wish to use the following credit card Visa M Account Number Expiration Date	lasterCard		e		
Billing Address:		•			
Signature				<u>—</u> —	

## Return this reservations form and payment to:

Elaine Jacobs, Associate Director of Athletics Stambaugh Stadium 1003 Youngstown State University Youngstown, OH 44555