



## *Franklin County Saddle Club, Inc.*

**2801 N. Road 60**

**PO Box 2885**

**Pasco, WA 99302**

**[www.franklincountysaddleclub.com](http://www.franklincountysaddleclub.com)**

The Franklin County Saddle Club would like to offer you the opportunity to advertise at our 15-acre equestrian facility, in our monthly newsletter and on our web site. Your advertising will help support a non-profit organization whose mission is to promote the association of horsemen and support youth interest in horsemanship.

You will receive the following:

- ❖ A 2' X 4' enameled metal sign with your business name and phone number, which will be displayed prominently on an arena panel in our main show arena so both exhibitors and spectators can view it during all events and activities. This is a two-color sign with your choice of colors. Special logos or other lettering must be furnished, minimum charge \$45.00 to \$85.00 extra. (artwork on a disc no extra charge)
- ❖ A listing of your name and phone number in our monthly newsletter. We will also showcase one or more businesses as space in the newsletter permits.
- ❖ Advertising is \$250.00 for a new sign with the first calendar year advertisement fee included. Renewals are \$75.00 per calendar year thereafter.

The Franklin County Saddle Club has been an active part of the equine community since 1956. Activities and events at our facility draw thousands of exhibitors and spectators annually. This broad-based advertising will ensure your business is well represented throughout the year.

Sincerely,

The Franklin County Saddle Club



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### Panel Advertising:

- ❖ A 2' X 4' metal sign with your name, address, phone number, and two colors.
- ❖ Special logos or other lettering must be furnished (extra charge minimum \$45.00 to \$85.00).
- ❖ \$250.00 for new sign with the first calendar year advertisement fee included.
- ❖ \$75.00 for renewal for one (1) calendar year thereafter.

### Sign information:

Name of Business or Farm

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Address

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City, State, Zip

\_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ Amount \$ \_\_\_\_\_ Check No. \_\_\_\_\_

FCSC Representative \_\_\_\_\_