



Victory's Gait @ Sweet Dreams Farm

Micah 6:8 Walking the Walk ...

HORSE SPONSORSHIP AGREEMENT

NAME: _____ EMAIL ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____ OTHER PHONE: _____

ADDRESS: _____

Sponsorship Level you are agreeing to:

_____ **General Sponsorship:** This sponsor provides a monthly donation or one time donation to help provide for horse care. Sponsors in this level who make a one-time donation of \$500 or more or monthly donations of \$50 or more will be recognized on VG's website and Facebook page. I understand this monthly supporter does not wish to work towards horse ownership and further understand I can come to the farm and visit the horse I sponsor, after scheduling an appointment.

_____ **Working Horse Sponsor:** This sponsor has been through the VG program and provides both a monetary donation of _____ (\$25 is the minimum) and commits to work _____ hours a week work at VG with their horse and the farm. I understand and agree that I am having more horse time with my sponsored horse am gaining life experience that prepares me to look towards horse ownership. I understand that if the monthly donation and work hours are missed consecutively without notice, the sponsorship is cancelled.

Signed: _____ **Date:** _____