



44 Park Place
Goshen, NY 10924
Phone: 845.294.5333
Fax: 845.294.3998

Yes! I wish to be a Grand Circuit Race Sponsor

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Name of Race: _____

As you would like it to read on the top of the race program page.

Date I would like to sponsor a race (check one):

July 2nd **July 3rd** **July 4th** **July 5th**

I would like to have a race photo: Yes _____ No _____

I will be available to present a trophy: Yes _____ No _____

My tax-deductible donation of \$100.00
made payable to **Goshen Historic Track** is enclosed.
We are a nonprofit 501(c)(3) organization.

