



**PLEASE COMPLETE THE INFORMATION BELOW AND  
RETURN IT THROUGH REGULAR MAIL.  
THANK YOU.**

SPONSOR INFORMATION - UPDATE		
RERP NUMBER:		
CORPORATION NAME & dba (If Applicable):		
REGISTERED OWNER'S NAME OF THE CORPORATION:		
PROGRAM MANAGER OF SCHOOL/RIDING ACADEMY:		
NAME, DIRECT PHONE NUMBER, & EMAIL ADDRESS OF OTHER AUTHORIZED PERSON(S) OF CONTACT:		
PROGRAM MANAGER'S DIRECT LINE & EMAIL:		
<b>ADDRESS: No Post Office Box addresses will be accepted.</b> ***** <b>One Address Only – This should be the business address &amp; not the school's address.</b>	Street:	
	City:	County:
	State:	
	Zip Code:	
SCHOOL PHONE NUMBER:		
SCHOOL FAX NUMBER:		
SCHOOL EMAIL ADDRESS:		
SCHOOL WEBSITE:		
<b>SIGNATURE OF REGISTERED OWNER OF CORPORATION:</b> <b>(VERIFY ALL INFORMATION IS ACCURATE AND CORRECT)</b>		

ACTIVE RANGE DATA			
RERP #	RANGE SITE NAME & COURSES OFFERED	RANGE SITE ADDRESS	CLASSROOM LOCATION ADDRESS

RIDERCOACH DATA			
RC ID #	NAME	RC ID #	NAME

**USE ADDITIONAL SHEET(S) IF NECESSARY**