



**UNITED PROFESSIONAL  
HORSEMEN'S ASSOCIATION**

**UPHA Office**  
123 East Main Street Midway, KY 40307  
PO Box 3728 Midway, KY 40307

**Phone: (859) 231-5070 Fax: (859) 255-2774**  
[www.uphaonline.com](http://www.uphaonline.com)

### UPHA FOUNDATION | DONATION FORM

Donor Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Total Amount of Donation: \$ \_\_\_\_\_ to the UPHA Foundation general fund to be used in the area of greatest need  
OR the following program(s):

- |  |   |
|--|---|
| <input type="checkbox"/> UPHA American Royal National Championship | <input type="checkbox"/> UPHA Legal Fund                        |
| <input type="checkbox"/> UPHA Classics                             | <input type="checkbox"/> UPHA Maria Knight Memorial Scholarship |
| <input type="checkbox"/> UPHA Challenge Cup                        | <input type="checkbox"/> UPHA Open Gate Learning Center         |
| <input type="checkbox"/> UPHA Dewey Henderson Benevolent Fund      | <input type="checkbox"/> UPHA National Conference               |
| <input type="checkbox"/> UPHA Exceptional Challenge Cup            | <input type="checkbox"/> UPHA Sandra Hall Memorial Scholarship  |
|  | <input type="checkbox"/> UPHA Ribbons of Service                |

#### Payment Information

Check payable to UPHA Foundation       Visa/Mastercard/American Express/Discover (Circle one)

\*\* A 4% Convenience Fee will be added to All Credit Card Transactions

Card #: \_\_\_\_\_  Billing address same as above

Name on card: \_\_\_\_\_ Exp date: \_\_\_\_\_ CVV: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Memorial or Honoring Gift (Optional)

This gift is given in memory or in honor of (please circle): \_\_\_\_\_

Name of the person to notify of memorial: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Donor Signature

\_\_\_\_\_  
Date

**Please Return form with payment to: UPHA Foundation, P.O. Box 3728 Midway, KY 40347**

The UPHA Foundation (UPHA) is a non-profit 501(c)3 charitable organization. Contributions to UPHA are tax deductible to the full extent of the law. Please consult your accountant for any clarification.

Tax letter will be issued by the UPHA Foundation once payment is received. Thank you so much for your generosity and support of the UPHA Foundation.

#### Foundation Use Only:

Date & Initial

Donation form received: \_\_\_\_\_

Donation received: \_\_\_\_\_

Received by Executive Director: \_\_\_\_\_

Received by Director of Fundraising: \_\_\_\_\_