



Saturday, Oct. 26, 2019 • 10:00 AM - 1:00 PM • Galvin Middle School, Wakefield, MA 01880

SPONSORSHIP OPPORTUNITIES

Company Name: _____

Contact Name: _____

Address: _____

Telephone: _____

Email: _____

PLEASE SIGN US UP AS:

- Sprinter Title Sponsor (2 Opportunities)
- Runner Business Sponsor (4 Opportunities)
- Jogger Business Sponsor (8 Opportunities)

| | SPRINTER: TITLE SPONSOR \$2,000 (2 Opportunities) | RUNNER: SPONSOR \$500 (4 Opportunities) | JOGGER: SPONSOR \$250 (8 Opportunities) |
|---|--|--|--|
| Company logo (or name if no logo provided) on all promotional materials | X (Logo has priority placement at the top of the page). | X (Logo placed at the bottom of the page). | X (Smaller logo placed at the bottom of the page). |
| Be a featured sponsor profile in our Health Living article series. Distributed online and in newspaper. | X | X | |
| Company name included in all press releases and chamber publicity before during and after event. | X | X | X |
| Featured on our Healthy Living Expo Website & Facebook page. | X | X | X |
| Exhibitor: table/chairs included. Priority placement at Expo on floor. | X X 2 tables | X 1 table | X 1 table |

Complete & return form with payment by September 15 for guaranteed inclusion in print promotional materials. (Return by September 10 for all online & event promotion)

- Mail to: Wakefield Lynnfield Chamber of Commerce, P.O. Box 585, 5 Common Street, Wakefield, MA 01880
- Email to: Info@WakefieldLynnfieldChamber.org
- Call us: 781-245-0741

Enclosed is my check for: \$_____ made payable to: "Wakefield Lynnfield Chamber of Commerce"

Paying by credit card. (you may also call in your credit card number at number above

I authorize you to charge \$_____ to my VISA or Mastercard acct: #_____

Expiration date (mm/yyyy) _____ Security code: _____ Postal zip code: _____