Event Sponsorship Request Form
COCA’s 25th Annual Skeet, Trap and Sporting Clays Event
Wednesday, November 4, 2020
OR
Thursday, November 5, 2020
NILO Farms
AND
Winchester Shooting Facility

CONTACT OUR OFFICE TO SEE WHAT IS STILL AVAILABLE!!
Sponsorship Opportunities – All courses and/or trap/skeet facility:
Each sponsoring company may put up signs, banners, and tents, as appropriate, per location.

- **Hospitality Tent**: $400.00 each (1 max per venue)
- *Opportunity for company volunteers to meet shooters one-on-one.
  - [ ] NILO Farms (November 4th)
  - [ ] Winchester Shooting Facility (November 4th)
  - [ ] NILO Farms (November 5th)
  - [ ] Winchester Shooting Facility (November 4th)

- **Lunches**: $500.00 each (2 max Event Date)  Quantity
  - [ ] NILO Farms (November 4th)  ____
  - [ ] Winchester Shooting Facility (November 4th)  ____
  - [ ] NILO Farms (November 5th)  ____
  - [ ] Winchester Shooting Facility (November 5th)  ____

  **TOTAL:** $____________

- **Sponsorship Sign**: $225.00 each  Quantity
  - [ ] NILO Farms (NOV 4th & 5th)  ____
  - [ ] Winchester Shooting Facility (NOV 4th & 5th)  ____

  Signs will remain up for both event dates.

  **TOTAL:** $____________

Sponsorships include the following:
- Sponsor(s) will be recognized on any literature, program announcement/mailings and our website, as applicable, provided COCA has a firm commitment at the time the event is announced.
- Sponsor(s) are allowed to have a banner displayed at the event location, as appropriate.

**REQUEST FORM**

Date of Request (first come first serve) __________________________

Event Date Requested: __________________________

**COMPANY INFORMATION**

Company Name: ____________________________________________
Address: ____________________________________________________
Contact Person: _____________________________________________
Job Title: ___________________________________________________
Phone Number: _____________________________________________
Email: _____________________________________________________
Website address: ____________________________________________

**PAYMENT INFORMATION**

GRAND TOTAL (from left column): $___________________________

- [ ] Check enclosed: Make check Payable to COCA, Inc.
- [ ] Send Invoice (to above address)
- [ ] Bill to Credit card
- [ ] Mastercard
- [ ] Visa
- [ ] American Express
- [ ] Discover
- [ ] Card Number: ____________________________
- [ ] Expiration Date: _____/____/_____
- [ ] Zip Code where STATEMENT is sent: __________
- [ ] VCode: __________

Billing address: [ ] Same as Company address above
- [ ] Different Bill to Address: ________________________________

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