



SPONSORSHIP FORM

Business Name _____

Name To Be Advertised _____

Contact Person (s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Sponsorship

Name of Sponsorship _____

Price Of Sponsorship _____

Amount Enclosed _____ (please note that half of the sponsorship fee must be paid before we can include your company in an advertisement)

Sponsorship Payment: Check Credit Card Cash/Money Order

You can call the office to make your credit card payment

X _____
Signature/Date

Please verify above information before signing.

In the event that a sponsorship must be cancelled, the request must be made in writing to the SCAS; 25% refund (minus material cost incurred for logo/imprinted sponsored items) will be issued until (insert date) After that date, no refunds will be extended.

**** Please Note all banners are paid for and supplied by the sponsor not Summit County Fair or Summit County Agricultural Society**