

Sponsorship Application Form

Organization Name:

Your Non-Profit ID Number:

Date Submitted:

Event/Program Name:

Event Date:

Event Hours & Location:

Number of years event has been held in community:

Event Contact

Name/Title:

Address:

Phone/Fax:

E-Mail:

Provide a brief description of the event/campaign, including primary marketing objective, a brief history, and the current activities for which you are seeking support. Please be specific.

Are you seeking:

____ Sponsorship Fee

____ In-Paper Ad Placement

____ In-Kind Donation

____Other (Employee Volunteers, Committee Members, etc...)

____Booth/Event Display

Projected Attendance for event:

Projected Revenue:

Admission Price:

Please list all other media sponsors committed to this project, including sponsorship levels:

Please list all non-media sponsors committed to this project:

Will all sponsors cross-promote with other sponsors (i.e. use logos/mentions in all advertising and promotions) _____Yes_____No
If no, please explain:

Do you have an advertising/promotional budget for this event/program?

Do you have a matching dollars program?

What advertising agency, if any, are you working with?

What services are they providing for this event/program?

Please list any other departments of this newspaper you are working with:

Please list all sponsor levels/benefits:

Which benefits are available to sponsors? (Where applicable please indicate dollar value of benefit.)

_____ Inclusion in printed pieces (direct mail, programs, etc...)

_____ Booth/Table at event

_____ Signage at event

_____ Subscription Sales Opportunity

_____ Single Copy Sales Opportunity

_____ Event Program Ad (Size & Value)

_____ Complimentary tickets/parking passes

_____ Broadcast/Billboard/Web Recognition

_____ Tickets for pre-event cross promotions (ticket-giveaway contests, etc...)

_____ Donation to our Newspapers in Education program added to admission price.

_____ Minimal addition to admission price for cost of a newspaper to each attendee.

Name/Title of person who prepared this document:

Signature_____ Date_____

Please return by fax to 505-823-7782.