



SPONSORSHIP APPLICATION FORM

Deadline – April 15, 2017

Register by Jan. 15 to be included in early-spring advertising.

An electronically fillable form is available at www.CelebrateWestHartford.com. Save the completed application as a PDF and email to Linda.Geisler@WestHartfordCT.gov with your company logos and credit card payment (or payment by check may be mailed separately).

June 10 & 11, 2017

Company Name _____ Office # _____
 Contact Name _____ Cell # (during event) _____
 Address _____ Email _____
 City _____ ST _____ ZIP _____

Please complete ALL 4 SECTIONS below. QUESTIONS? CALL 860-561-7512

1 Choose Sponsorship Level	EXCLUSIVE SPONSORSHIPS*	FESTIVAL SPONSORSHIPS	ROAD RACE SPONSORSHIPS
	<input type="checkbox"/> PRESENTING: \$10,000 <input type="checkbox"/> STAGE: \$6,000 <input type="checkbox"/> ARTS & CRAFTS FAIR: \$6,000 <input type="checkbox"/> STEP-UP-TO-HEALTH CHALLENGE: \$2,900 <input type="checkbox"/> HORSE-DRAWN TROLLEY: \$2,900 <input type="checkbox"/> PONY RIDE & PETTING FARM: \$2,900 <small>*Limited to one sponsor each. Please call for availability.</small>	<input type="checkbox"/> DIAMOND: \$5,700 <input type="checkbox"/> RUBY: \$2,700 <input type="checkbox"/> SAPPHIRE: \$1,400 <input type="checkbox"/> MEDIA or IN-KIND <input type="checkbox"/> NON-EXHIBITING CASH DONOR <small>Patron (\$1,000) Donor (\$500) Supporter (\$250) Friend (\$100) Other: \$ _____</small>	<input type="checkbox"/> GOLD: \$6,000 <input type="checkbox"/> SILVER: \$3,000 <input type="checkbox"/> BRONZE: \$1,500 <input type="checkbox"/> ROAD RACE GIFT CARD PRIZE/S: <small>_____ @ \$30 = _____ _____ @ \$25 = _____ _____ @ \$20 = _____</small>
A portion of proceeds will be donated to the Town That Cares and the Leisure Services Scholarship funds.			

2 Reserve Booth Space

EXHIBITOR REGISTRATION:
 Saturday & Sunday Saturday Only Sunday Only Not Exhibiting*
* Celebrate W.H. may assign your booth to a West Hartford-based non-profit.

PROVISION REQUEST: Sponsors receive a complimentary 10'x10' tented booth including one (back) wall, one 8' table and two chairs. *Larger booth sizes must be requested.*
 Additional provisions requested: Tent Walls _____ Tables _____ Chairs _____

ELECTRICITY REQUEST: 20 amp duplex outlets are available for \$50/plug-in. Please list each item requiring power: (refer to tags attached to each appliance.)
 Appliance (1) _____ Amps: _____ Watts: _____
 Appliance (2) _____ Amps: _____ Watts: _____

LIST FREE ACTIVITIES & PROMOTIONAL GIVE-AWAYS PLANNED*:

Booths may be used for promotional purposes only. Exhibitors are encouraged to be creative in drawing visitors to their booths. CWH may publicize planned promotional activities.
 * **Certificate of Insurance:** Organizations considering a potentially hazardous activity or give-away must obtain approval from the CWH office and provide a Certificate of Insurance indicating that General Liability and Workers Compensation coverages (if your organization has employees) are in force. If required, Certificate of Insurance must name TOWN OF WEST HARTFORD as additional insured from June 10 through June 11, 2017.
 Certificate Holder is Town of West Hartford, 50 South Main St, West Hartford, CT 06107.

3 Make Payment

SPONSORSHIP AMOUNT..... \$ _____

ELECTRICITY
 _____ plug-ins x \$50 each.....\$ _____
 Please complete Electricity Request.
 =====

TOTAL.....\$ _____

PAYMENT METHOD

Charge my _____ VISA _____ MasterCard
 # _____
 Exp. Date: _____

Check payable to: TOWN OF WEST HARTFORD
 _____ Enclosed _____ Sent Separately

Send an Invoice

**DEADLINE APRIL 15, 2017
 for payment & forms**

4 Sign Agreement

WAIVER: By submitting an application to this event, I acknowledge that property is brought to this event at my own risk. I also realize that in bringing goods to this event, setting up my space, operating during the event and removing my remaining property at the end of the event, there is a possible risk of injury to myself and others working with me while participating in the event. I agree to assume the risk of injury which I might suffer or for property loss or damage of any kind while participating in the event. In addition, I agree to hold the Town of West Hartford, its employees, officials and agents harmless from any liability to those individuals working in my booth or to third parties arising from my provision of goods or services at this event.

SIGNED: _____ DATE: _____

ON BEHALF OF: _____

All applicants subject to approval by the CWH Committee

11/22/2016