

CANADA DAY SPONSORSHIP

APPLICATION FORM

PERSONAL INFORMATION

Full Name : BUSINESS / ORGANIZATION :				
Address : Phone Number :				
SPONSORSHIP DETAILS				
Sponsorship : Platinum Gol \$750 \$45			2	
Sponsorship Package	Platinum	Gold	Silver	Bronze
Centre Stage Banner	Yes			
Honorable Mention at the Event	Yes	Yes		
Sponsorship Wall	Yes	Yes	Yes	
Social Media Advertisement	Yes	Yes	Yes	Yes
Printed Advertisement	Yes	Yes	Yes	Yes
Vendor Space	2	1	1	1
Sponsorship Recognition	Yes	Yes	Yes	Yes
Vendor Space Yes No Required : Note : Payment can be made via cash, che		orm is still require	d to be completed	l.
OFFICE USE ONLY				
Date : Membership Level : Membership Number : Payment Type : Staff Name : Staff Signature :				

More Information:

203 Main Street East, Shelburne Ontario (519) 925-2600 (Office) clerk@shelburne.ca Shelburne.ca