Sponsorship Application

Company Name _____

Contact Person

Mailing Address

City/State/ZIP _____

Website

Onsite Contact Person Cell Number

Pe

Υοι

You

- Ver
- Ac

VIE

Pa

Off

Lin

OU

	\$500 (20 available)
ANTITY	

Pa

Can be modified from an existing package or completely unique. List details of the agreement below.

erks for All Sponsors*	Community	Wonder
ur business exposed to over 50,000 Northeast Florida guests	1 parking lot banner	1 parking lot banner
-	1 "fun fact" site plaque	1 "fun fact" site plaque
ur business will be featured on the A Night of Wonders website	1 social media recognition post	1+ social media recognition post
0	35 general admission tickets	75 general admission tickets
ndor Hut (optional) in our Vendor Village	\$2,500 (4 available)	\$5,000 (4 available)
cess to our VIP tent every night.		
Tent will feature snacks, sodas, water, fire pits, seating, games,	Presenting	Holiday
networking	2 parking lot banners	1 parking lot banner
? parking pass	4 "fun fact" site plaques	2 "fun fact" site plaques
	3+ social media recognition posts	2+ social media recognition posts
rking Lot Banner	300 general admission tickets	150 general admission tickets
fered as a stand-alone or add	Featured on A Night of Wonders Map	Featured on A Night of Wonders Map
on to another package.	Logo on every employee t-shirt	Logo on every employee t-shirt
nit 4 per business.	1 10-sec intercom feature per hour	
\$500 (20 available)	\$30,000 (3 available)	\$10,000 (3 available)
TITY		

CHOOSE SPONSORSHIP PACKAGE(S) *

Amount: or In-Kind **PAYMENT INFORMATION TOTAL PAYMENT** (including donations)

MONETARY DONATION

Amount:

Phone Number

Email _____

Facebook Page

Payment Method 🗆 Cash

\$_____ or \Box In-Kind □ Invoice Needed

Date of payment: _____

□ Check #_____

* See sponsor packet for more details.