

Benefitting the Child Advocacy Center SATURDAY, OCTOBER 12, 2024 THE CAROLINA BARN

EXCLUSIVE MASK COMPETITION SPONSORSHIP BENEFITS

- 2 tickets at a reserved table at the event
- VIP gifts at the table
- Name on posters & invitations
- Name on CAC website, Social Media & sponsor board at event
- Recognition from the stage at the event
- Recognition in the CAC newsletter
- Logo/Name on trophy or plaque given to winners
- Logo/Name on sign at mask registration table





To secure your exclusive Mask Competition sponsorship and to make the most of your sponsor benefits, we must receive your Sponsor Agreement not later than <u>July 25th.</u> This is an exclusive sponsorship, and we are offering the first opportunity to your company as the 2024 Mask Competition Sponsor.

Please see reverse for Agreement.

Please mail or fax to: Child Advocacy Center PO Box 488, Fayetteville, NC 28302 Phone (910) 486-9700 Fax (910) 486-8677 www.CACFayNC.org Or scan & email to Roberta@CACFayNC.org





To Benefit the Child Advocacy Center Saturday, October 12, 2024 • 6PM–10PM • The Carolina Barn

Exclusive Mask Competition Sponsor Agreement – Cash Contribution \$1000

| Company name as you want it to appear in printed materials | | | | | |
|--|---------------------|--------------------|------------------|--------------------------|------------|
| Contact person name and | title | | | | |
| Mailing address | | | | | |
| City | State | | Zip | | |
| Phone | Email | l | | | |
| Alternate contact name | | | | | |
| Phone | Email | l | | | |
| Signature & title of author | ized representative | | | Date | |
| Payment method: Check enclosed. | | | | | |
| Invoice me for one payme | | | | s, due Aug. 1 & Sept. 1. | |
| Bill Credit Card. (Please | | al information be | low.) | | |
| Please bill my credit card | for my \$1000. | | | | |
| Credit Card Number: | | | | | |
| Payment Type:Visa _ | MasterCard | Expiration Date | e:/ m m / y y | _ CVV code | |
| Name on Card: | | | | | |
| Billing Address : | | | | | |
| City: | | _ State: | | _Zip: | |
| Signature: | | | | | |
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