



BENEFITING NORTH PORT SCHOOLS

| Business/Individual Name Contact Name | | | | |
|--|---|--|--|--|
| | | | | |
| Email | Phone | | | |
| Name as it should appear on pr | inted materials | | | |
| l am proi | ud to support the North Port Young Professionals at this level: | | | |

I am proud to support the North Port Young Professionals at this level:

| Choice | Amount | Name Of Sponsorship Package |
|--------|---------|--------------------------------|
| | \$5,000 | Title Sponsor |
| | \$3,000 | Big Bash Sponsor |
| | \$2,000 | Entertainment Sponsor |
| | \$2,000 | Foam Glow Party Sponsor |
| | \$1,200 | Extreme Sponsor |
| | \$1,000 | Big Tent Sponsor |
| | \$750 | Security Sponsor |
| | \$500 | Fire Department Sponsor |

| Choice | Amount | Name Of Sponsorship Package |
|--------|------------|--------------------------------|
| | \$500 | Police Department Sponsor |
| | \$500 | |
| | \$500 | Inflatable Sponsor |
| | \$250 | Mini Bash Sponsor |
| | \$150 | Vendor Booth |
| | \$50 | Non-Profit Booth |
| | Any Amount | Donation |
| | Your Time | Volunteer |

| Total: | |
|-----------|------|
| Signature | Date |

THANK YOU FOR YOUR SUPPORT!

Please make checks payable to: North Port Area Chamber of Commerce.

Please mail completed form and payment to: North Port Area Chamber of Commerce Attn: NPYP

14140 Tamiami Trail, North Port, FL 34287

Questions? Please contact: North Port Young Professionals Planning Committee at npyoungprofessionalsegmail.com

NOTE: This agreement shall serve as an invoice. To ensure proper processing of your sponsorship and for inclusion in all printed materials, this signed agreement and all payments must be received by July 5th. Please note all payments are final.