



# Taste of Kennesaw / Sponsorship Levels

**November 4, 2017**

**11:00 AM – 8:00 PM (Concert at 6:00 PM)**

TITLE/PRESENTING SPONSOR: (\$7,500) + (NOT AVAILABLE)

GOLD/ASSET SPONSOR: (\$2,500) +

**Assets to Sponsor**

Ground Act (Free Show) Kids Zone  
Food Court  
Entertainment/Concert ATM

- PROMINATE TASTE LOCATION (UP TO 30 FEET)
- CREDIT FOR ASSET SPONSORSHIP
- LOGO PROMINATE ON ALL TASTE PRINTED MATERIALS
- LOGO ON RACK CARDS THAT ARE DISTRIBUTED TO SCHOOLS AND COMMUNITY AT LARGE (15,000)
- INDUSTRY EXCLUSIVE
- TWO TABLES FOR EVENING CONCERT

SILVER SPONSOR: (\$1,500)

- LISTED ON RACK CARDS THAT ARE DISTRIBUTED TO SCHOOLS AND COMMUNITY AT LARGE (15,000)
- 10 X 20 TENT / BANNER / SIX FOOT TABLE / 2 CHAIRS
- TWO TABLES FOR EVENING CONCERT
- LOGO ON ALL TASTE PRINTED MATERIAL

BRONZE SPONSOR: (\$750)

- 10 X 10 TENT / BANNER / SIX FOOT TABLE/ 2 CHAIRS
- ONE TABLE FOR EVENING CONCERT
- NAME ON BANNER

SUPPORTING SPONSOR: (\$250)

- TABLE FOR EVENING CONCERT



# Taste of Kennesaw November 4, 2017 Sponsorship Form



**Gold**  
**\$2,500 +**

**Silver**  
**\$1,500**

**Bronze**  
**\$750**

**Supporting**  
**\$250**

If you are interested in participating in the 2017 Taste of Kennesaw, please fill-out this form **completely** and mail it to us with your payment. **Please make check payable to: JRM Management Services, Inc.** Any sponsor above **Silver Level** may require a separate detailed agreement.

**Company Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Company Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Office:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**List Product / Promotion (anything not listed may not be permitted)** \_\_\_\_\_

If you are interested in paying via credit card, fill-out the **Credit Card Authorization (CCA)** information below. Signing this contract will authorize JRM Management to charge the amount specified in the CCA, if your applica-

Circle one:	VISA	MASTERCARD	AMEX
Credit Card Number:	_____		Billing Zip: _____
Exp Date:	_____	3-digit security code on back (4 - digit front for AMEX): _____	Amt: _____
I _____ (print name of card holder) hereby represent that I have the authority to execute the credit card authorization and agree that this authorization will be effective for the amount (above) and on the date signed (below). I understand and consent to the use of my credit card without my signature on the charge slip, that a photocopy or fax of this agreement will serve as an original, and this Credit Card Authorization (CCA) cannot be revoked.			
Cardholder's Signature:	_____		Date: _____

tion is accepted. If you are **not** accepted, you will **not** be charged and your application will be returned. **No refunds will be given for cancellation of the event due to inclement weather or circumstances beyond our control.** I have read and fully understand all the details as set forth and agree to abide by all exhibit rules and regulations, which are part of this contract. I hereby agree to indemnify and hold harmless the Kennesaw Business Association, City of Kennesaw, JRM Management, all organizations and persons sponsoring, managing or in any other way participating in the 2017 Taste of Kennesaw, from any loss, claim, penalty or lawsuit in any way arising from my operation or involvement in the festival. **APPLICATION MUST BE SIGNED.**

**SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_