

# Florida Fun Mini Match

## SPONSORSHIP AGREEMENT

### COMPANY INFORMATION

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### CONTACT INFORMATION

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact E-Mail: \_\_\_\_\_

### SPONSORSHIP INFORMATION

Sponsorship Package: \_\_\_\_\_ Sponsorship Amount: \$ \_\_\_\_\_

Additional Sponsorship Contribution (please circle one): **YES** **NO**

Additional Sponsorship Amount: \$ \_\_\_\_\_

Total Sponsorship Amount: \$ \_\_\_\_\_

I, the undersigned, agree that my signature ensures payment of the above stated amount to the Florida Fun Mini-Match. Checks should be made to **Dance, Dance, Dance**. I understand that advertising material such as logos, business cards, and banners are due to The Florida Fun Mini-Match Chairman by December 1st, 2019. Graphics for advertisements should be e-mailed to [info@dancedancedance.biz](mailto:info@dancedancedance.biz). **I also understand that all sponsorship funds are to be paid in full and turned in with this contract by December 1st, 2019.**

Please keep a copy of this contract for your records. If a 501c(3) receipts is needed for donations over \$500, please request at the time of payment and one will be provided.



Please mail checks and completed contracts to:

**Dance, Dance, Dance**  
**Attn: Mary K. Thomas**  
**P.O. Box 4781**  
**Ocala, Florida 34478**

Sponsor Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mini-Match Administrative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### FOR ADMIN USE ONLY

Date: \_\_\_\_\_ Admin Initials: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Method of Payment: CASH CARD Check #: \_\_\_\_\_

Trade out Amount: \_\_\_\_\_

Additional Notes: \_\_\_\_\_