



COMMUNITY FEST

Township of Ewing

The College of New Jersey

SATURDAY, SEPTEMBER 23, 2017

THE COLLEGE OF NEW JERSEY

10 A.M. – 5 P.M.

(RAIN OR SHINE)

SPONSOR APPLICATION FORM

Business/Organization Name: _____

Contact Person Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____ E-mail: _____

SPONSORSHIP LEVEL:

Please check your preferred sponsorship level:

- | | | | |
|--|-------------------|--|------------------|
| <input type="checkbox"/> Premiere | (\$10,000) | <input type="checkbox"/> Community Builder | (\$1,500) |
| <input type="checkbox"/> Signature | (\$ 7,500) | <input type="checkbox"/> Community Visionary | (\$1,000) |
| <input type="checkbox"/> Shining Star | (\$ 5,000) | <input type="checkbox"/> Community Patron | (\$ 750) |
| <input type="checkbox"/> Community Leader | (\$ 3,000) | <input type="checkbox"/> Community Ambassador | (\$ 500) |

BOOTH

All sponsors at levels of \$500 and above receive a complimentary booth in The Community Fest Village on Sponsor's row

- ☐ **YES, we would like to reserve our complimentary booth** ☐ **NO, we are unable to attend**
☐ I am a sponsor below the \$500 level and wish to reserve a booth in addition to my sponsorship
☐ I do not wish to be a sponsor at this time, however, we would like to reserve a booth (\$175)

TOTAL ENCLOSED \$ _____

LOGO ART

Please email your company logo (in high resolution jpeg or vector-based format) to comfest@tcnj.edu. Sponsors at \$500 and above will have their logo art displayed on the Community Fest web site. All sponsors below the \$500 level will have their company names included. Companies at levels of \$1,500 and above may display their company logo banners on site.

GUIDELINES FOR PARTICIPATION

I understand that if there is inclement weather on September 23, 2017, the event will still take place rain or shine. **(No refunds will be given in the event of inclement weather).** I understand that all solicitation must be confined to my booth space. I understand that I will not sell food products. I understand that I must check in at my assigned time as designated in my confirmation packet, which I will receive the week of **September 11th** and I must remain on site until breakdown at 5 pm. I understand that **NO VEHICLES WILL BE ALLOWED ON SITE BETWEEN 10 AM AND 5 PM.**

I understand that if I or anyone associated with my group, company, business, partnership, or organization fails to comply with the rules and regulations outlined in the application packet, we may be asked to leave the event. I certify that I am at least 18 years of age and authorized to execute this agreement on behalf of myself, group, company, business, partnership, organization and accept legal process on behalf of myself, group, company, business, partnership, organization. I also agree to indemnify and hold harmless the Community Fest committee and the Township of Ewing, The College of New Jersey, their directors, employees, agents, representatives, servants, and anyone else connected with Community Fest from all damages, liabilities, costs and expenditures, including attorneys' fees and costs of defense, which may occur by reason of participation in Community Fest. I also give permission to the Community Fest committee to use photographs of the booth and all personnel/volunteers associated with the booth to be used for, but not limited to, publications, event programs, magazines, and Internet and television promotions.

I have read, understand and will comply with all the stated rules and regulations contained hereto.

Signature: _____ Date: _____

Please mail this completed form with a check made payable to "Community Fest" in the enclosed envelope to:

Community Fest
The Township of Ewing
2 Jake Garzio Drive

ATTENTION: Kim Macellaro, Clerk's Office Ewing, New Jersey 08628

If you have further questions, please call the Township at 609.538-7609 or visit our web site at www.tcnj.edu/comfest

For Committee Use Only

Date received: ____ / ____ / ____ Reviewed: ____ / ____ / ____ Application: ☐ Approved ☐ Denied
Date Applicant Notified: ____ / ____ / ____ Comments: _____