



SPONSORSHIP APPLICATION

Byron Center, Michigan

WMCAF.COM

Deadline for all printed material May 20th

Date of Application: _____

Name of Business or Individual: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____ Fax: _____

Event Sponsor

_____ Masterpiece \$1000 or Larger \$ _____

_____ Portrait \$500 or Larger \$ _____

_____ Landscape \$250 or Larger \$ _____

_____ Friend of the Festival (any level) \$ _____

Artist Sponsor \$100 _____

Name of Artist _____

You may name your artist or we will select for you.

Kids Chalk Sponsor (1) \$500 _____

Kids chalk has option to operate and staff the kids chalk, with materials.

People Choice Sponsor (1) \$1000 _____

People choice sponsor has the option to operate and staff that event with recognition on materials.

T-Shirts: T-shirts included in sponsorship: Masterpiece #3, Portrait #2; Landscape #1;

Additional T-shirts : \$10.00 each

Indicate total number (complimentary and additional) of each size: T-Shirt Size (adult): ___ XSmall ___ Small ___ Med ___ Large ___ Xlarge ___ 2xl ___

If your sponsorship allows for complimentary registration:

Please indicate artist or team name. Additional teams may be added for fee. Each artist must register - see artist registration form at www.wmcaf.com or call for forms.

Artist / Team Name:

Sponsored by:

Byron Community Wellness Foundation

Thank you for your support!

West Michigan Chalk Art Festival

% Byron Community Wellness Foundation

P.O Box 384 Byron Center, MI 49315

Email: info@wmcaf.com

Phone: 616-878-6021

Fax: 616-878-3980

Thank you for your sponsorship: We are a 501c3 nonprofit registered in the SOM. Your gift is tax deductible.

Payment Information:

Sponsorship Total: _____

T-Shirts Total: _____

Total Payment _____

Checks Payable To:

Byron Community Wellness Foundation

WM Chalk Art Festival

_____ Please send Invoice

_____ Check Enclosed