



Sponsorship Form

Basic Information *(please print clearly)*

Full Name: _____ Title: _____

Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Choose a Level

Sponsorship is available at the following levels on a first come first assigned basis. Please contact us for package details on sponsorship levels.

Event Presenting Sponsor - (1 available)

Health Screening Sponsor – (1-2 available)

The “eat healthy” Stage Co-Sponsors - (2 available)

The “road” Sponsors - \$200 (open)

The “show” Sponsors - (open)

Event

Please let us know which event you are interested in.

Date: _____ Location: _____

PAYMENT OPTIONS: To become a sponsor, please fill out this form and choose one of the following payment options:

1) Check: Please complete and send form with your check payable to “eat healthy roadshow”

Address: 3020 Issaquah-Pine Lake Rd. #529

Sammamish, WA 98075

2) Paypal: Please email completed form to: violeta@lavistaadvertising.com, then call Violeta for payment.

** Please Note: Application fees are non-refundable*

Application must be received no later than one week prior to the event.

By signing this form, I acknowledge that I have read and agree to the terms mentioned.

Signature

Date

Please feel free to contact us with questions via email, violeta@lavistaadvertising.com or call 206-406-5784.