



TASTE OF THE CATSKILLS FESTIVAL
53 MAIN STREET
DELHI, NY 13753
TASTEOTHECATSKILLS.COM
607-746-8886

I WANT TO SPONSOR THE TASTE OF THE CATSKILLS FESTIVAL

BUSINESS NAME
CONTACT
ADDRESS
PHONE.....
FAX.....
EMAIL
WEBSITE

WHAT LEVEL OF SPONSORSHIP ARE YOU SIGNING UP FOR?

- ☆ PRESENTING SPONSOR _____
- ☆ EVENT SPONSOR \$5,000 _____
- ☆ CURATOR OF THE CATSKILLS \$2,000 _____
- ☆ 4 STAR CATSKILL SUPPORTER \$1000 _____
- ☆ 3 STAR CATSKILL SUPPORTER \$500 _____
- ☆ 2 STAR CATSKILL SUPPORTER \$200 _____
- ☆ 1 STAR CATSKILL SUPPORTER \$100 _____
- ☆ WHERE TO STAY SPONSOR \$150 _____
- ☆ ACTIVITY SPONSOR _____

TOTAL OWED _____

PLEASE MAKE CHECKS PAYABLE TO TASTE OF THE CATSKILLS FESTIVAL

NAME _____ DATE _____

As the legal representative of the above business, I agree to the terms of participation to be a sponsor at the agreed upon level for the Taste of the Catskills Festival.

TASTE OF THE CATSKILLS REPRESENTATIVE _____ DATE _____