



Washington County Business SHOWCASE



Presented by
**Washington County Local Development Corporation
and Washington County Tourism**

Thursday, June 11, 2015
Whitehall Athletic Club - Whitehall, NY
Set up: 1-2 p.m.
Business Networking: 2-3 p.m.
Showcase: 3-6 p.m.

PLEASE SEND PAYMENT TO:
Washington County LDC
383 Broadway
Fort Edward, NY 12828
For more information call:
(518) 746-2292

SPONSOR:

Premier Sponsor at the \$1,500 level:

- ◇ Prominent logo recognition in all Showcase, radio and print advertising including signage, invitations, programs and all other marketing materials.
- ◇ Logo prominently placed on all "event" e-blasts and "thank you" e-blasts.
- ◇ Your company name and logo will be highlighted as a premier sponsor on the LDC website and Facebook page, with a link to your company's website.
- ◇ Prominent 8 ft. exhibitor table with linen (electricity included if needed).

Event Sponsor at the \$750 level:

- ◇ Logo recognition in all Showcase print advertising including signage and programs.
- ◇ Logo placed on all "event" e-blasts.
- ◇ Your company logo will be listed as an event sponsor on the LDC website and Facebook page, with a link to your company's website.
- ◇ Prominent 8 ft. exhibitor table with linen (electricity included if needed).

EXHIBITOR:

- \$150.00: includes 8 ft. exhibitor table and linen
- \$75.00: includes half of 8 ft. exhibitor table and linen
- I am a food/beverage producer who will provide a minimum of 150 samples/bites of the following: _____ in exchange for an 8 ft. exhibitor table with linen.

ADDITIONAL INFORMATION (check only if applicable):

- Yes, I would like to increase my exposure by donating the following door prize (Minimum value \$25): _____
- Yes, I will need electricity (limited spaces available)

----- **DEADLINE FOR RESERVATION IS June 4, 2015** -----

Company Name: _____

Contact Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____

Email: _____ Website: _____

Payment Total Due: \$ _____

Payment Method: Check: # _____ Credit Card: Type of card _____

Name on card: _____ Card Number: _____

Expiration Date: _____ CCV Code: _____ Signature: _____