



Sponsorship Agreement

Company Name: _____

Contact Name: _____

Email: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Name as it should appear on printed material: _____

Title Sponsor - \$30,000

Reception Sponsor - \$10,000

“Chuckle” Sponsor - \$5,000

“Giggle” Sponsor - \$2,500

“Smile” Sponsor - \$1,000

Program Book Advertisements

**Full Page Ad - (5 1/2”W x 81/2” L), JPEG. No Bleed
Format - Full Color - \$300**

**Half Page Ad- (5 1/2”W x 41/4” L), JPEG. No Bleed
Format - Full Color - \$150**

Please make checks payable to: ***Wake Up Narcolepsy***

Please return Sponsor Agreement & Payment to:

Ashley Walenta
Event Coordinator
Blue Sky Sports & Entertainment
150 Washington Street
Norwell, MA 02061

IMPORTANT: This Agreement shall serve as an invoice

All payments must be received by September 1st

Sponsor ads and logos must be received by September 1st

For more information contact

**Ashley Walenta
781.421.3025 x208**

awalenta@blueskyse.com

SPONSOR

Signature

Type or Print Name

Date

Wake Up Narcolepsy is a 501(c)(3) nonprofit organization. Wake Up Narcolepsy Employer Identification Number is 263768711.