

# Vino for Vitality

Please type or print clearly in blue or black ink. Retain a copy for your records.

## SPONSORSHIP AGREEMENT

CONTACT NAME:				TITLE/AFFILIATION:
COMPANY NAME :				
COMPANY ADDRESS				
CITY	STATE	ZIP CODE	PRIMARY PHONE NUMBER	
EMAIL ADDRESS	COMPANY WEBSITE			
<b>SPONSORSHIP LEVEL</b>				
<b>TITLE LEVEL</b> \$500 and above  Commitment: \$ _____	<b>PLATINUM LEVEL</b> \$250 to 499  Commitment: \$ _____	<b>GOLD LEVEL</b> \$150 to \$249  Commitment: \$ _____	<b>SILVER LEVEL</b> \$75 to 149  Commitment: \$ _____	
All levels of sponsorships include varying marketing opportunities before, during and after the event. Please refer to the Sponsorship Benefits flyer for specific information.				
<b>PAYMENT INFORMATION</b>				
<input type="checkbox"/> I would like to purchase an additional tickets to the event for \$25. Total: _____  <input type="checkbox"/> I would prefer to pay by check. Please make checks payable to "Richmond Area High Blood Pressure Center" <input type="checkbox"/> The check is ENCLOSED with this SPONSORSHIP AGREEMENT <input type="checkbox"/> The check will be paid no later than the agreed date of _____  <input type="checkbox"/> I would prefer to pay online by credit card.  Email Address: _____ Phone Number _____				
<b>SWAG, LOGOS, AND MARKETING MATERIALS</b>				
<input type="checkbox"/> I am submitting marketing materials to be included in the event. Please describe items, quantity, and purpose:  _____  Please email a logo in jpg, jpeg, tiff or png format to kriley02@gmail.com no later than Friday, July 31, 2009 . After this date, no guarantee is made that a sponsor may be advertised on on-site.				

**Please review and sign the "Terms and Conditions" outlined on the second page of this agreement.**

**Terms and Conditions**

This is an agreement (“Agreement”) between the aforementioned Company (“Company”), as signed on behalf of their sponsor (“Sponsor”) and the Richmond Area High Blood Pressure Center doing business as the Center for High Blood Pressure (“CHBP”), a 501(c)(3) organization, to enroll in a sponsorship package (“Package”) for the “Vino for Vitality” wine tasting to be held on August 13, 2009 (“Event”). The term CHBP includes planning representatives for the event. The term “expressly” as it relates to agreements includes postal mail, faxes and emails between the Sponsor and CHBP.

Purpose of Agreement: The purpose of this agreement is for the Sponsor to support the Vino for Vitality wine tasting fundraiser to be held on Thursday, August 13, 2009 which provides funds to be used to assist the CHBP’s mission of providing health care to the medically uninsured in the Richmond area.

Deadline: The deadline for Sponsors to submit their agreement is Friday, July 31, 2009 unless expressly agreed upon by the event coordinators.

Payment: Sponsor agrees to pay the amount in full with the return of the sponsorship agreement unless a separate payment agreement is expressly made between the Sponsor and the CHBP. The Company is responsible for any returned checks because of insufficient funds, closed accounts, or any other bank-related reason are subject to bank and other incurred fees. A receipt will be provided upon payment in full.

Cancellation: Sponsor may cancel their sponsorship in the Event with advance written notice up until Friday, August 7, 2009 with a return of their prepaid funds less a \$25 administrative fee. Sponsor forfeits any cancellation rights and refunds after this date. The event coordinators and the CHBP reserve the right to refuse an application for sponsorship. If for any reason the event is cancelled because of the actions of the CHBP, the CHBP will remit to the Sponsor 100 percent of funds paid.

Marketing: All marketing materials used in conjunction with the Event will be designed and formatted by the CHBP EXCEPT for the Sponsor’s individual brochures, information sheets, business cards, logos, etc. The CHBP reserves the right to refuse the submission of marketing materials. The event’s main brochure will be designed by the CHBP as to accommodate all sponsors and participants and the CHBP retains the right to reformat information for aesthetic or technical purposes. Sponsor’s may not distribute individual marketing materials on-site. the CHBP will determine the best way to distribute marketing materials. All marketing materials must be submitted to THE CHBP no later than Wednesday, August unless an alternative date is expressly agreed upon.

Indemnification: The CHBP is not responsible for any misrepresentation of the Company by the Sponsor on behalf of their Company. Any agreement entered into in violation of a Company’s policy will be rendered void under the agency laws of the Commonwealth of Virginia, and reimbursement will occur in accordance with the cancellation policy outlined in this agreement. CHBP is not responsible for any liability arising from such actions.

Arbitration Clause: Should a dispute arise related to this contract, the issue will be solved by an arbitrator agreed upon by both parties and paid for by the losing party.

**By signing this contract, I swear that I am authorized to enter into this contract on behalf of the aforementioned company. I affirm that the information submitted is true and I agree to the terms and conditions of this Sponsorship Agreement.**

\_\_\_\_\_  
Sponsor’s Signature

\_\_\_\_\_  
Date

Please return this signed agreement to the attention of Karyn A. Riley, Event Coordinator:

By Fax: **(301) 431-1769**

By Email: **kriley02@gmail.com** (as either a PDF or Word [.doc] attachment)

\_\_\_\_\_  
Please do not write below this line

Application received on \_\_\_\_\_

Payment received on \_\_\_\_\_