



## SPONSORSHIP OPPORTUNITIES

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### Platinum Sponsor

**\$25,000**

- Banner at Event entrance
- Banner at Start & Finish Line
- Logo on Bibs
- Corporate booth
- 25 Free Runner Spots
- Corporate Booth in Festival area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

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### Gold Sponsor

**\$10,000**

- Banner at Festival Area
- Logo on sleeve of runner shirt
- 10 Free Runner Spots
- Corporate Booth in Festival area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

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### Silver Sponsor

**\$5,000**

- Banner at Registration Center
- Logo on Gauntlet buff
- 6 Free Runner Spots
- Corporate Booth in Festival Area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

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### Bronze Sponsor

**\$2,500**

- Banner at First Aid Station
- 4 Free Runner Spots
- Corporate Booth in Festival Area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

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### Awards Sponsor

**\$2,500**

- Logo on ribbon of all awards (age, gender, team, etc.)
- 4 Free Runner Spots
- Corporate Booth in Festival Area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

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### Children's Obstacle Course Sponsor

**\$2,500**

- Logo at Course
- 4 Free Runner Spots
- Corporate Booth in Festival Area
- Announcement by emcee throughout the day
- Logo on Obstacle on course
- Logo on Sponsor Board

All sponsors are mentioned in social media, on the web and elite sponsorship levels are mentioned in Press Releases



**JUNE 22, 2019**

# SPONSORSHIP CONTRACT

## LEVEL OF SUPPORT

- Platinum Sponsor..... \$25,000
- Gold Sponsor..... \$10,000
- Silver Sponsor..... \$5,000
- Bronze Sponsor..... \$2,500
- Awards Sponsor..... \$2,500
- Children's Obstacle Course Sponsor..... \$2,500

## CONTACT INFO

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

## PAYMENT

Please check one.



CHECK



CREDIT CARD

Make CHECKS payable to Gaylord Hospital

Name on Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV# \_\_\_\_\_

Signature: \_\_\_\_\_

► Mail to: Development Office, Gaylord Hospital, PO Box 400, Wallingford, CT 06492