

2024 Clovis Memorial Run Silver Level Sponsorship Agreement

Clovis Memorial Run – Honoring Our Legacy

This agreement between the City of Clovis Senior Activity Center and _____ is for the Silver Sponsorship level of the 2024 Memorial Race to be held May 25, 2024. The event includes a 5K run/walk and 2-mile walk, a ½ mile kid’s run and a ½ mile senior walk or wheelchair push. In conjunction with the event, a resource fair and pancake breakfast will be held. The event is to honor veterans and seniors. Proceeds from the event will be used to improve senior programs at the Clovis Senior Center. In order to get your organization’s name on printed material and shirts, this agreement must be signed by **April 30th, 2024.**

As part of the silver level sponsorship, the City of Clovis agrees to the following:

- Name of sponsoring organization on participant shirts (no logo) listed as a silver level sponsor. There will be no more than ten silver level sponsors.
- Name of sponsoring organization listed on day of event materials (fliers, brochures, etc.).
- Name of sponsoring organization and hyperlink to the organization’s website on the Memorial Race web page.
- A booth at the resource fair the day of the event.
- The name of the sponsoring organization announced as a Silver sponsor the day of the event.
- The organization may provide information or literature for the “swag” bag to be provided to participants. The deadline to provide information for the “swag” bag will be **May 13th, 2024.**

The sponsoring organization agrees to the following:

- Payment for sponsorship in the amount of \$550 due no later than 30-days prior to the race date.
- A raffle prize valued at \$50 delivered on or before the event date or provide \$50 with the \$550 sponsorship payment and we will purchase a gift card for your raffle prize.
- Provide logo artwork and distribution materials as noted above.
- Agreement signed and payment received by **April 30th 2024.**

Company Name _____ Contact: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Will you need power at your table? _____

Email: _____

Please provide a brief description of your company and the services you provide for our brochure.

By signing below, you and your organization agree to the terms of the sponsorship.

_____ Date: _____

Signature

Name (printed) _____

Make checks payable to Clovis Senior Activity Center, 735 Third Street, Clovis, CA 93612