



GREATER IDAHO FALLS
CHAMBER OF COMMERCE



2010 Fall Bowling Tournament

Sponsorship Opportunities

Friday, October 15, 2010

1 pm – 4 pm

Bowlero

Idaho Falls, ID

OVERVIEW

The Chamber Fall Bowling Tournament is a networking event that allows Chamber Members to interact with one another in a casual atmosphere while bowling a few frames. Prizes will be given for the first place, second place and last place teams.

MEDIA SPONSOR

\$500 *(1 available)*

As a Media Sponsor of the Chamber Bowling Tournament you will receive the following for your investment:

- § 1 – four person team in the tournament
- § Company logo on registration forms
- § Company logo on sponsorship agreements
- § Sign with company name and/or logo displayed at the tournament
- § Company acknowledgement at the tournament
- § Company logo in the tournament program
- § Company name and/or logo on tournament promotions
- § Company logo and a link to your company website on email campaigns promoting the tournament
- § Opportunity to display company information and distribute company promotional materials at the tournament
- § Opportunity to MC the tournament

LANE SPONSOR

\$100

As a Lane Sponsor of the Chamber Bowling Tournament, you will receive the following for your investment:

- § Sign with company name and/or logo displayed at the tournament
- § Company acknowledgement at the tournament
- § Company logo in the tournament program
- § Company name on tournament promotions
- § Company logo and a link to your company website on email campaigns promoting the tournament
- § Opportunity to display company information and distribute company promotional materials at the tournament



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**2010 FALL CHAMBER BOWLING TOURNAMENT
SPONSORSHIP AGREEMENT**

Please indicate your level of commitment:

Media Sponsor \$500 Lane Sponsor \$100

Organization: _____

Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Signature: _____ Date: _____

Payment Information

Check Enclosed Credit Card (*fill in credit card information below*)

Name on Card: _____

Credit Card #: _____ Amount: _____

Expiration Date: _____ CVV #: _____ Billing Zip Code: _____

Signature: _____

**Fax this form to (208) 523-2255 Attn: Kerry Huggins
For more information please call (208) 523-1010 ext. 15**