



# Community Health & Wellness Fair and 5K Race

Saturday, March 29<sup>th</sup>, 2008 9 am to 2 pm  
Hightstown High School, 24 Leshin Lane, Hightstown, NJ

## Sponsorship / Participation Agreement

Company / Agency name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_

- We will join you as a PREMIER TITLE SPONSOR - \$5000 - (first-come basis)**  
*Includes free 5K Race registration for up to 50 participating employees or members, as well as premier placement of exhibit space at main entrance to Health & Wellness Fair. Your organization's logo will also be featured on event t-shirts and promotional materials.*
- We will join you as a CORPORATE SPONSOR - \$2500**  
*Includes free 5K Race registration for up to 25 participating employees or members as well as preferred exhibit space at Health & Wellness Fair. Your organization's logo will appear on event t-shirts and promotional materials.*
- We will join you as a COMMUNITY BOOSTER - \$1000**  
*Includes free 5K Race registration for up to 10 participating employees or members, as well as strategic placement of exhibit space at Health & Wellness Fair. Your name or company will be listed on all promotional materials.*
- We would like to make a donation in the amount of \$ \_\_\_\_\_**
- We would like to reserve \_\_\_\_\_ space(s) @ \$25 at the Health & Wellness Fair**  
*(Please provide additional information on reverse side)*
- We would like to donate products or services to support this event**  
*(e.g. food, prizes, gift certificates, etc. – please provide additional information on reverse side)*

*Participants are encouraged to bring informational brochures, giveaways or other promotional items to distribute at the event.  
Feel free to call or attach your comments, requests, suggestions, or questions.*

**Fax or mail this form with payment to CASC before Fri. 2/15/08**

CASC, PO Box 88, Hightstown, NJ, 08520  
Phone: (609) 443-4464 FAX: (609) 443-4866

**Enclose your business card or logo,  
or e-mail a .JPG image to: [mizporter@comcast.net](mailto:mizporter@comcast.net)**

*Donations to CASC are tax-deductible to the full extent of the law.  
**Thank you for your vital support!***

CASC Health & Wellness Fair & 5K Race  
 Saturday, March 29<sup>th</sup>, 2008, 9 am – 2 pm  
 Hightstown High School

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**We will represent our organization at the CASC Health & Wellness Fair.**

Describe the services or items to be sold or promoted:

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Type of Exhibit:

\_\_\_ Educational \_\_\_ Promotional \_\_\_ Product/Craft \_\_\_ Food \_\_\_ Other  
*(please describe)*

Is electrical hook-up needed? \_\_\_ yes \_\_\_ no

Would you like to reserve a time slot for a demonstration? \_\_\_ yes \_\_\_ no

**\$25 non-refundable registration fee – payment required in advance**

*Please indicate method of payment:*

- Check #\_\_\_\_\_ is enclosed
- Charge credit card below (or call our office at 609-443-4464):

Cardholder name:	
Billing Address	
Card Number	Exp. Date
Authorized Signature	

*Participants are encouraged to bring informational brochures, giveaways & other promotional items to be distributed at your table or in visitors' welcome bags. If you have any questions or requests, please contact CASC at (609) 443-4464.*

**We would like to donate the following items to support this event:**

***\*\*\*Please indicate quantities in the space provided\*\*\****

Bottled water:	Juice boxes:	Fresh fruit ( <i>specify</i> ):
Bagels/muffins ( <i>specify</i> ):	Other food/snacks ( <i>specify</i> ):	Other items ( <i>gift certificates, prizes, etc. – specify</i> ):

*You will receive a confirmation e-mail to arrange for pickup or delivery.*

**Thank you for your vital support of this event!**