



OLYMPIA FAMILY THEATER

2023-2024 Mid-Season Sponsor Agreement

CONTACT INFORMATION

Business Name _____

Contact Name _____

Mailing Address _____

City / State / Zip _____

Phone _____

Email _____

SPONSORSHIP LEVEL (ART DIMENSIONS = HEIGHT X WIDTH)

- ☐ **Leading Role (Two plays)** – \$1,000 – FULL - SCREEN AD 1000px w. x 1600px h. or 6.25" w. x 10" h.
 - ☐ **Leading Role (One play)** – \$500 – FULL - SCREEN AD 1000px w. x 1600px h. or 6.25" w. x 10" h.
 - ☐ **Supporting Role (Two plays)** – \$500 – 1/2 SCREEN AD / 1000px w. x 800px h. or 6.25" w. x 5" h.
 - ☐ **Supporting Role (One play)** – \$250 – 1/2 SCREEN AD / 1000px w. x 800px h. or 6.25" w. x 5" h.
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DIGITAL AD:

- ☐ I will provide a digital file of our logo/artwork to marisa@olyft.org by the art deadlines.
- ☐ I will contact Jill Carter for design assistance jill@olyft.org (fees apply).

PAYMENT:

- ☐ Payment enclosed and written out to Olympia Family Theater
- ☐ Partial payment enclosed.
Remaining balance will be paid: (mm/yy) ____/____, (mm/yy) ____/____
- ☐ Please send me an INVOICE
- ☐ In-Kind Trade: Value: \$ _____
- ☐ Credit Card:

Amount to be charged: \$ _____

Card number: _____

Name as it appears on card: _____

Expiration date: _____

CVC number (3 digits on the back): _____

SIGNATURE:

Sponsor Signature _____ Date _____

OFT Staff Signature _____ Date _____

RETURN SIGNED AGREEMENT TO MARISA@OLYFT.ORG AND A SIGNED COPY OF THIS WILL BE EMAILED TO YOU.