

Bitterroot Performing Arts Council  
**SPONSORSHIP / DONOR LEVEL**  
**ADVERTISING AGREEMENT: 2017-2018**

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Best Phone Number: \_\_\_\_\_

Sponsorship / Donor Level \$ \_\_\_\_\_  Business or  Individual  Billboard (\$5000)

Name as you want it listed in program / sponsor recognition: \_\_\_\_\_

Culinary sponsor or in-kind donation: \_\_\_\_\_ Value: \_\_\_\_\_

Payment Method: Check # \_\_\_\_\_ Pledge \_\_\_\_\_ To be invoiced on: \_\_\_\_\_

Credit Card # \_\_\_\_\_ CCV Code \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on card: \_\_\_\_\_

If a performance sponsor, please indicate show preference: \_\_\_\_\_

Ticket Benefit: \_\_\_\_\_ 2 Season Tickets \_\_\_\_\_ 4 Season Tickets \_\_\_\_\_ 8 tickets to sponsored performance.

\_\_\_\_\_ 4 Show Tickets \_\_\_\_\_ 2 Show Tickets

Prefer tickets to be held at box office/will call: \_\_\_\_\_ Will Pick Up: \_\_\_\_\_ Please Deliver: \_\_\_\_\_

Show/date selection for ticket benefit: \_\_\_\_\_

Please Note: If a show selection is not indicated, we will rely on you to contact our box office at 363-7946 with this choice at least 6 weeks in advance of the show.

**PROGRAM ADVERTISING:**

The advertising / sponsorship you have selected includes advertising space in our season series program. The sponsor is responsible for creating and delivering the finished ad in an acceptable manner to our printer per the printer's specifications.

Your package includes one  Black  Full Color  Full Page  1/2 Page  1/4 page  1/8 page

**\*\*\*The advertiser / sponsor is responsible for delivery of their ad material to our printer no later than Monday, Aug. 14, 2017 and a final proof of the ad prior to printing. \_\_\_\_\_ (initial)**

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail \_\_\_\_\_

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

BPAC Representative: \_\_\_\_\_

Date: \_\_\_\_\_

Office Use Only:

Date(s) payment received \_\_\_\_\_

Date ticket issued \_\_\_\_\_

BITTERROOT



(406) 363-7946 • 127 West Main St., Suite 103 • Hamilton, Montana 59840 • www.bitterrootperformingarts.org

501(c)(3) number: 27-0273010

Performing  
Arts COUNCIL