

**KwanzaaFest 2010 December 11,-12, 2010**  
**SPONSORSHIP & EXHIBITOR REGISTRATION FORM**

**CORPORATE**

**The Carol Brandon Breast Cancer  
Prevention Fund Section**

- |   |  |
|---|--|
| <input type="checkbox"/> Title Sponsor - \$50,000           | <input type="checkbox"/> Honor Sponsor - \$25      |
| <input type="checkbox"/> Presenting Sponsor - \$40,000      | <input type="checkbox"/> Buddy Sponsor - \$45      |
| <input type="checkbox"/> Platinum Sponsor - \$30,000        | <input type="checkbox"/> Mammogram Sponsor - \$90  |
| <input type="checkbox"/> Gold Sponsor - \$20,000            | <input type="checkbox"/> Supporter Sponsor - \$100 |
| <input type="checkbox"/> Silver Sponsor - \$10,000          | <input type="checkbox"/> Business Sponsor – \$250  |
| <input type="checkbox"/> Ticket Sponsor - \$10,000          | <input type="checkbox"/> Executive Sponsor - \$500 |
| <input type="checkbox"/> Bronze Sponsor - \$5,000           | <input type="checkbox"/> Other \$ _____            |
| <input type="checkbox"/> Corporate Exhibitor only - \$2,500 |  |
- Honorary Donation (Non-Exhibitor ) \$ \_\_\_\_\_  
No, I/We cannot participate, but here is a donation.

**Exhibitor & Non Profit**

- |  |  |
|--|--|
| <input type="checkbox"/> Non-Profit Association (must present 501c3 docs) – \$350            |  |
| <input type="checkbox"/> Exhibitor <i>Early Bird</i> Special - \$350<br>(thru July 31, 2010) | <input type="checkbox"/> Yes, sign me up to participate in<br>Kwanzaafest 2010 |
| <input type="checkbox"/> Exhibitor - \$400 (Aug 1 – Nov 1, 2010)                             |  |
| <input type="checkbox"/> Exhibitor - \$500 (Nov 2 – Dec. 10, 2010)                           |  |

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**Company Information**

(Please return this completed form with payment)

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

Company/Org: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Payment Type: (circle one) Master Card, Visa, AMEX, Discover, Corporate Check

Credit Card #: \_\_\_\_\_

Exp (MM/YYYY): \_\_\_\_\_ CVC (3 Digit Code): \_\_\_\_\_

Amount: \$ \_\_\_\_\_

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

For Check Payments, remit to: KwanzaaFest, Inc. P.O. Box 224725 Dallas, TX 75222  
Inquiries, please call (214)653-6671 or visit our website, [www.johnwileyprice.com](http://www.johnwileyprice.com),  
or fax your registration form to (214)653-6622