

# PLAINFIELD SHOREWOOD AREA CHAMBER OF COMMERCE 2024 ANNUAL HARVEST 5K RUN/WALK & KIDZ MILER SPONSORSHIP CONTRACT

Your company is responsible for meeting the following deadlines to guarantee that you will receive the full benefit of your sponsorship:

**RACE BAG PSACC Member - \$200 Non-Member - \$250**

- Payment in full of sponsorship by Friday, August 2nd
- Provide an item for the “swag bag” which must be delivered to the Chamber office by Friday, September 6th
- **1000 Items** needed (Please try not to send Paper as your item)

The Plainfield Shorewood Area Chamber of Commerce is responsible for the following items so that you receive the full benefit of your sponsorship:

- Placing item in “swag bag” and distributing to all runners

I agree to meet the above deadlines as specified. Failure to meet the deadlines may result in not receiving the full value of the sponsorship package. I am aware that this sponsorship is non-refundable. Mail check payable to PSACC with this signed contract to:

Plainfield Shorewood Area Chamber of Commerce  
Attn: 5K Run / 10K Run  
24109 W. Lockport St.  
Plainfield, IL 60544  
Phone: 815/436-4431 Fax: 815/926-5315  
Email: [PSACC@PSACchamber.com](mailto:PSACC@PSACchamber.com)  
Website: [www.PSACchamber.com](http://www.PSACchamber.com)



## Company

Name: \_\_\_\_\_  
(As you want it to appear on advertising materials)

Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

Credit card \_\_\_\_\_ Check \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Zip: \_\_\_\_\_