

Uncle Dave Macon Days

32nd Old Time Music & Dance Festival
P.O. Box 5016, Murfreesboro, TN 37133-5016
July 10th, 11th, & 12th 2009

SPONSOR FORM

Level I \$20,000 Title Sponsor

Level IV, \$300 Commercial
Vendor

Level II, \$15,000

Level V, Patron, Open amount

Level III, \$10,000

Per space - One 10 x 10 Space

Terms: _____ agrees to participate at the 32nd Uncle Dave Macon Days Old-Time Music, and Dance Festival.

(please initial)

_____ The festival is held at 312 South Front Street at Cannonsburgh Village, the village is owned by the City of Murfreesboro Parks & Recreation Department.

_____ The show includes Friday, Saturday and Sunday. Friday's event begins at 4 p.m. until 10/11 pm. Saturday, 9 a.m. – 10/11 p.m. Saturday evening has the heaviest attendance. Sunday set-up is optional Gospel singing is held from 12-5 p.m.

_____ Participant agrees to abide by rules set forth by the "Usage Agreement" between the City of Murfreesboro and the Uncle Dave Macon Day's committee.

I _____ agree to the instructions and terms.

Hold Harmless Agreement

_____ and/or its affiliates hereby releases, holds harmless and indemnifies the representatives, volunteers, Uncle Dave Macon Day's Inc., and the City of Murfreesboro from any and all injuries, accidents, deaths, and all acts and omissions for any damages or injuries to its property, employees, or volunteers while participating at the July 2009 event.

Signature Owner/Agent: _____ Date: _____.

Print Name _____

Uncle Dave Macon Day's
Sponsor/Commercial Application

Company: _____

Address: _____

City: _____ State: _____ Zip _____

Reservation made by: _____

Individual to be present and responsible: _____

Contact number: _____

Sponsor requests space to: _____

Electricity is available (110 15 v). Heavy-duty extension cord approximately 100' is needed to reach your booth. Canopies are recommended. You are responsible for all your set-up needs.

Explain your presentation: (Please provide a photograph).

Will literature or product be distributed? (Please attach a copy)

Special request: _____

Level of sponsorship/Commercial Vendor: _____ Enclosed Fee: \$ _____

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_____ Approved _____ Denied (reason) _____

By: _____ Date: _____

Payment: _____ Check No. _____ Recpt No. _____