

## CANTON MARATHON MILE SPONSORSHIP CONTRACT

We the undersigned, submit our application for the reservation of a mile of the Canton Marathon.

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

Phone: (    ) \_\_\_\_\_ Cell: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_

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

Authorized by (print name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature of Authorizing Party \_\_\_\_\_ Date: \_\_\_\_\_

First mile requested @ \$500: \_\_\_\_\_

Subsequent miles @ \$350: \_\_\_\_\_

Subsequent miles @ \$350: \_\_\_\_\_

Subsequent miles @ \$350: \_\_\_\_\_

**TOTAL PAYMENT AMOUNT:** \_\_\_\_\_

• **CREDIT CARD PAYMENTS**    Circle card type: Visa / MC / AMEX / Discover

Card number # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CCV Code \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Billing address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

• **Checks payable to CANTON MARATHON LLC**

**FAX CONTRACT TO: 330-438-0107    SEND PRINT-READY ART TO: [steve@CantonMarathon.com](mailto:steve@CantonMarathon.com)**

**FINISHED SIZE: 28" X 91"**

**SPONSOR IMPRINT AREA: 24"w X 28.5"h**

**Art must be vector format, fonts converted to outlines. File formats accepted: EPS, AI, PDF (CS4)**

