

# 2nd ANNUAL COMMUNITY OPEN HOUSE & MIXER



## APPLICATION FOR SPONSORSHIP & EXHIBIT

| INCLUSIONS   | TABLE SPACE ONLY       | SPONSORSHIP & TABLE SPACE |
|--|------------------------|---------------------------|
|  | \$250<br>(Member \$50) | \$500<br>(Member: \$150)  |
| One (1) draped 6' wide table + 2 chairs  | ✓                      | ✓                         |
| Sponsor's Logo /Exhibitor listing on FACCSV website with link to exhibitor's website                             | ✓                      | ✓                         |
| Name inclusion in Social Media Marketing   | ✓                      | ✓                         |
| Email campaigns  |                        | ✓                         |
| Educational seminar sponsorship with up to 15 mins presentation slot in the auditorium (First-Come-First-Served) |                        | ✓                         |
| Inclusion in looped video presentation at the event (Sponsors' logo/Exhibitor Listing)                           |                        | ✓                         |
| Logo on any published Flyers, Posters or Banners   |                        | ✓                         |

Saturday Sept 16, 2017 11:00 am to 4:00 pm  
 COUNTY OF SANTA CLARA SERVICE CENTER  
 1555 Berger Drive, San Jose, CA 95112

**THE NUMBER OF TABLES ARE LIMITED AND WILL BE BOOKED ON A FIRST-COME-FIRST-SERVED BASIS WITH SIGNED AND PAID APPLICATION.**

EXHIBIT SPACE & SPONSORSHIP are offered at a discount to PAID, ACTIVE and are IN GOOD STANDING MEMBERS of FACCSV.

PRESENTATION SLOTS available to SPONSORS on a first-come-served basis.

### APPLICATION

Number of Tables: \_\_\_\_\_

COMPANY / ORGANIZATION \_\_\_\_\_

NAME OF AUTHORIZED REPRESENTATIVE \_\_\_\_\_

ADDRESS, CITY, STATE, ZIP \_\_\_\_\_

EMAIL ADDRESS (Exhibit Details & Regulations will be sent to) \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

MOBILE NUMBER \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### PAYMENT METHOD

- CHECK payable to FACCSV
- Credit Card (pay by phone)
- Credit Card (pay via online)

Submit your application to [info@filamchamber.org](mailto:info@filamchamber.org) or call (408) 283-0833 or (408) 802-0423

### FOR FACCC USE ONLY

Date received \_\_\_\_\_ Amount received \$ \_\_\_\_\_ Check #/CC \_\_\_\_\_  
 Invoice# \_\_\_\_\_ Table # assigned \_\_\_\_\_ Application accepted by \_\_\_\_\_