

Sponsorship

Tri-State Fall Convention 2017
Sturbridge Host Hotel & Conference Center
Sturbridge, MA



This year Connecticut, Massachusetts and Rhode Island Fairs will hold a Tri-State Convention to discuss common issues of the Fair industry as well as ideas for entertainment, education and operational issues. The meeting will be held November 10th and 11th at the Sturbridge Host Hotel & Conference Center, Sturbridge, MA.

Sponsorships are a critical component to our meeting's success as registration fees will not cover all our costs. Fairs from Connecticut, Massachusetts and Rhode Island will be represented and each of our members will look forward sharing valuable ideas on how to make our fairs even better. Numerous speakers, workshop programs and entertainment are scheduled for Saturday's program.

There are three levels of sponsorships: Gold, Silver & Bronze

Gold sponsor (\$500) will receive:

- **Option A:** one full registration, booth at the trade show, listing in the program, onsite signage and recognition at the banquet, website listing.
- **Option B:** two full registrations (no booth), listing in the program, onsite signage and recognition at the banquet, website listing.

Silver sponsor (\$300) will receive:

- one full registration, listing in the program, onsite signage and recognition at the banquet, website listing.

Bronze sponsor (\$100) will receive:

- listing in the program, onsite signage and recognition at the banquet, website listing.

We are in the process of putting the program brochure together and we need to know your commitment. I hope you will be able to help us and we look forward to hearing from you by Sept 15th.

Make checks payable to: MAFA

Mail Sponsorship Form and check to:

MAFA • Tri-State Fall Convention
Bridget Burns, Secretary
P.O. Box 125, Abington, MA 02351
508-468-1552 • bburns@foxboro.com
TradeShow@CTAgFairs.org

MAFA.org
CTAgFairs.org

Sponsorship

Tri-State Fall Convention 2017
Sturbridge Host Hotel & Conference Center
Sturbridge, MA



Yes, We will be a Sponsor!

Company/Fair Name: – *as it should appear in listings in print and online:*

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

Website: _____

Sponsorship Level (Check one of the four options below)

GOLD

- Gold Option A:**
- Trade Show Booth
(a trade show application to be completed)
 - One Full Registration

- Gold Option B:**
- Two Full Registrations

Options A & B:

- Program Listing
- Onsite Signage
- Recognition at the banquet
- Logo and link represented on updates sent via e-mail
- Logo and link on the conference web-site page

\$500

SILVER

- Silver:**
- One Full Registration
 - Program Listing
 - Onsite Signage
 - Recognition at the banquet
 - Logo and link represented on updates sent via e-mail
 - Logo and link on the conference web-site page

\$300

BRONZE

- Bronze:**
- Program Listing
 - Onsite Signage
 - Recognition at the banquet
 - Logo and link represented on updates sent via e-mail
 - Logo and link on the conference web-site page

\$100

Please send your check, payable to **MAFA**, and mail to Massachusetts Agricultural Fairs Assoc., PO Box 125, Abington, MA 02351
If you have any questions, please contact Bridget Burns at 508-468-1552.

Check one _____ will be in attendance Name: _____
_____ will be in attendance Name: _____
_____ will not be in attendance

Your response by September 15 would be appreciated.

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Trade Show & Showcase Application



Connecticut, Massachusetts and Rhode Island Fairs are happy to announce the 2017 Joint Tri-State Convention & Trade Show. This will be held on November 10th & 11th, 2017 at the Sturbridge Host Hotel & Conference Center in Sturbridge, MA.

Trade Show will be held on Saturday November 11th from 8am till 5pm. Set-up can be on Friday afternoon or early Saturday morning. There will be convention activity on Friday night if you wish to have your booth open. Inquire about availability of Showcase times.

Set up: Friday – 7pm till 9pm • Saturday 6am-7am. **All Exhibits must be in place for 7am.**

Name of Act/Vendor– *as it should appear in listings in print and online:*

Type of Act/Vendor: _____

Company: _____

Contact Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

Website: _____

Describe Act/Vendor: _____

Check here if you are also a: **Gold Option A Sponsor.**

Showcase Yes please consider me for the showcase or other performances during the convention

Booth (member rate)	I am a current: <input type="checkbox"/> CT Member <input type="checkbox"/> MA Member	\$100.00	\$
Booth (non-member)		\$150.00	\$
Extra Table(s)		\$25.00	\$
Electrical		\$25.00	\$
Promotional Table only	Can't attend? - Send your promotional material for our promotional table for only	\$25.00	\$
Total			\$

Make checks payable to: MAFA

Mail Application and check to:

MAFA • Tri-State Fall Convention
Bridget Burns, Secretary
P.O. Box 125, Abington, MA 02351
Adam Miclette, Co-Chairman • Tradeshow@CTAgFairs.org
Deb Miclette, Co-Chairman



MAFA.org
CTAgFairs.org

2017-18 Associate Membership Application



TYPE OF BUSINESS

- | | | |
|---|--------------------------------------|--|
| <input type="checkbox"/> Attractions | <input type="checkbox"/> Entertainer | <input type="checkbox"/> Talent Agency |
| <input type="checkbox"/> Carnival | <input type="checkbox"/> Insurance | <input type="checkbox"/> Other (specify) |
| <input type="checkbox"/> Concessionaire | <input type="checkbox"/> Supplier | |
-

Business Name – *as it should appear in listings in print and online:*

Contact Person(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Cell: _____ Other: _____

E-mail Address: _____

Website: _____

Facebook: _____

Other Social Media: _____

Description of Product/Services: _____

Signature: _____

I hereby make an application for **ASSOCIATE MEMBER** in the **Association of Connecticut Fairs** for the period beginning November 1, 2017 and ending October 31, 2018.

I understand that my acceptance, if received by December 1st of the given year, may allow my name or business name to be printed as a member in the "2018 Connecticut Agricultural Fairs" brochure if room is available. I also understand that no matter when I become a member of the Association I will be listed on the Associations Web Page with the phone number, type of business, and email address I have provided.

Annual membership fee for Associate Membership is \$50.00.

Please enclose check made payable to the "ASSOCIATION OF CONNECTICUT FAIRS, INC."

Please check here: ___ Renewal of membership ___ New Membership

Mail Application and check to:
Association of Connecticut Fairs, Inc.
873-B Farmington Avenue, Berlin, CT 06037
860. 982.1366 • info@CTAgFairs.org



THE ASSOCIATION OF CONNECTICUT FAIRS, INC.
Associate Member Application

CTAgFairs.org

MASSACHUSETTS AGRICULTURAL FAIRS ASSOCIATION

Fair/Company Name _____ Telephone () _____

Contact _____ Title _____

Address _____

City _____ State _____ Zip _____

Website _____ Contact Email _____

General Info Email _____ General Info Phone _____

Signature _____ Title _____

Fair Dates Fair _____

Annual dues run from January 1 to December 31. Fair dues are \$20.00 per operating day. The fee is \$50.00 for all associate categories. Please make all checks payable to: ***Mass. Agricultural Fairs Association***

Fair Member: # _____ Days X \$20.00 per Day = \$ _____

Associate Member: \$50.00 \$ _____

Total Enclosed \$ _____

Type of Associate Membership (Please check one)

- | | |
|---|---|
| <input type="checkbox"/> Association | <input type="checkbox"/> Events |
| <input type="checkbox"/> Attractions & Acts | <input type="checkbox"/> Fair Supplies |
| <input type="checkbox"/> Booking Agency | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Carnival & Rides | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Commercial Exhibit | <input type="checkbox"/> Security |
| <input type="checkbox"/> Concessions-Food | <input type="checkbox"/> Special Services |
| <input type="checkbox"/> Concessions-Other | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Equipment | |

Mail this form along with check to:

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Bridget Burns
P.O. Box 125
Abington, MA 02351

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PHONE 508-468-1552