

# 2017 BUSINESS TO BUSINESS EXPO

Wednesday, November 29, 2017, 11am–2pm  
Gateway Technical College, Madrigrano Auditorium  
3520 30th Avenue, Kenosha



## COMPANY INFORMATION

business / organization name

street address

city state zip

phone fax

web address

contact person

contact person email

## SPONSORSHIP OPPORTUNITIES

- Platinum Sponsorship** (\$2,500) Naming rights: “2017 Chamber Business to Business Expo, presented by XYZ Company”, opportunity to introduce your business at Expo (5 min), double tables, company logo on invitation postcards, Kenosha News ads, email marketing, website, B2B Expo Program, and signage at the event
- Gold Sponsor** (\$1,000) Double tables, company logo on invitation postcards, Kenosha News ads, email marketing, website, B2B Expo Program, and signage at the event
- Silver Sponsor** (\$500) Single table, company logo on Kenosha News ads, email marketing, website, B2B Expo Program, and signage at the event
- Bronze Sponsor** (\$250) Includes company logo in B2B Expo Program and signage at the event

\*Marketing is on a schedule. Sponsors may not make it onto every mailing if you commit immediately before the event.

## CHAMBER CONTACT / MAILING INFORMATION

600 52nd Street, Suite 130, Kenosha, WI 53140  
Phone: (262) 654-1234 Fax: (262) 654-4655  
Email: info@kenoshaareachamber.com

This event will showcase Chamber Member businesses *that service and sell to other businesses*. The greater business community will be invited to attend for free and lunch will be provided to those who register.

## B2B EXPO PRICING (CIRCLE ONE)

	No Electricity	With Electricity
<b>KACC Member</b>	\$150	\$200
<b>Non-Member</b>	\$300	\$400

All registrations include a 2'x5' table and two chairs.

## PAYMENT / CANCELLATION POLICY

Payment must be received in full to confirm booth location or sponsorship. If your business is unable to attend the 2017 Business to Business Expo, please cancel by 4:00pm on November 22, 2017. No refunds will be given if a cancellation is made after this date. By signing below, I signify my understanding of this policy.

signature date

## PAYMENT INFORMATION

total amount

- Visa  American Express
- MasterCard  Check

name on credit card exp. date

credit card number cvv code

cardholder billing address

cardholder signature date