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**Sponsorship Opportunities:**

If you have any questions, please contact: Katie Shay Schneider at (314) 325-1295   
or [katie.schneider@OperationFoodSearch.org](mailto:katie.schneider@OperationFoodSearch.org)

***Please choose your support level:***

☐ **PARTY FOR PACKS TITLE SPONSORS – $5,000**

* Official Party for Packs Sponsorship
* Company brand on souvenir glasses, branding on all marketing materials
* Event banner with company logo
* Company featured on OFS Website, Instagram, Facebook and Twitter spotlights leading up to the event
* 10 complimentary tickets to Party for Packs.

☐ **THE FRIENDS BOARD SPONSOR – $2,500**

* Special recognition at event
* Name published on event banner with company logo
* Logo branding on all marketing materials
* Company featured on OFS Website, Instagram, Facebook and Twitter spotlights leading up to the event
* 6 complimentary tickets to Party for Packs.

☐ **THE TASTING SPONSOR – $1,000**

* Name published on event banner with company logo
* Logo branding on all marketing materials
* Company featured on OFS Website, Instagram, Facebook and Twitter spotlights leading up to the event
* 4 complimentary tickets to Party for Packs.

☐  **DRINK SPONSOR – $500**

* Name published on event banner with company logo
* Logo branding on all marketing materials
* 2 complimentary tickets to Party for Packs.

**Party for Packs**

**Thursday August 15, 2019 at Operation Food Search**

4:30 pm Vendor Arrival

5:30 pm Event Start

8:00 pm Event End

*Your generosity will support Operation Backpack, a program of Operation Food Search, a non-profit organization that heals hunger and strengthens our region’s future.*

**Event Includes: Sampling from Local Breweries, Wineries and Spirits**

**\* Appetizers\* Drink Tickets\* Souvenir Glass \* 50/50 Raffle \* Raffle Auction**

**Participation level:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Fee**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cannot attend, but would like to support OFS with a gift of** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY OR ORGANIZATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **STATE:** \_\_\_\_\_\_\_\_\_\_\_

**ZIP: \_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SPONSORS: Please email your preferred logo to Katie Shay Schneider at** [katie.schneider@OperationFoodSearch.org](mailto:katie.schneider@OperationFoodSearch.org) **(EPS or PDF format preferred)**

Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Expiration Date: Month \_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name on card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAYMENT (please check one):**

Check enclosed- payable to Operation Food Search

CREDIT CARD:

MASTERCARD

VISA

AMERICAN EXPRESS

DISCOVER

**Please return this form to Operation Food Search at**

**1644 Lotsie Boulevard, St. Louis, MO 63132**

**Tax ID Number: 43-1241854**

**Party for Packs**

**August 15, 2019 at Operation Food Search**

**VENDOR PARTICIPATION FORM**

COMPANY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ STATE\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF PRODUCTS THAT WILL BE AVAILABLE AS SAMPLES

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RESTRICTIONS:

(IF ANY)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ITEMS NEEDED: \_\_\_\_\_\_\_ TABLECLOTH \_\_\_\_\_ GLASSES/CUPS \_\_\_\_\_ ICE \_\_\_\_\_ DUMP BUCKET

PLEASE LIST ANY ADDITIONAL ACCOMMODATIONS REQUIRED HERE:

NAME AS YOU WOULD LIKE IT TO APPEAR IN THE PROGRAM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please return this form to Katie Schneider, [katie.schneider@operationfoodsearch.org](mailto:katie.schneider@operationfoodsearch.org), 1644 Lotsie Blvd, Overland, MO 63132