

# FIT FAMILY EXPO & GOODIE BAG

## PLATINUM LEVEL

### \$750 PREMIER PLACEMENT EXPO BOOTH

Only 5 available, next to stage and finish line.

#### INCLUDES

- ★ (1) 10'x10' canopy
- ★ (1) 6' table, tablecloth and (2) chairs
- ★ Exposure to more than 3,000 runners, walkers & volunteers

## GOLD LEVEL

### \$500 EXHIBITOR BOOTH IN PROMINENT LOCATION

15 available, next to Information Tent.

#### INCLUDES

- ★ (1) 10'x10' expo space & canopy
- ★ (1) 6' table, tablecloth and (2) chairs
- ★ Exposure to more than 3,000 runners, walkers & volunteers

## BRONZE LEVEL

### \$350 GOODIE BAG INSERT IN 3,500 BAGS

- ★ Goodie bag inserts can be product samples or promotional items like pens, key chains, magnets
- ★ Approved items need to be received by September 7, 2017



EMAIL COMPLETED FORM TO: [Iliana@MTZPro.com](mailto:Iliana@MTZPro.com)  
(310) 836-5100

The Hirshberg Foundation for Pancreatic Cancer Research is a  
501(C) 95-4640311

# EXHIBITOR & GOODIE BAG APPLICATION

EMAIL APPLICATION  
 Iliana@MtzPro.com  
 OR MAIL  
 MTZ Productions  
 6444 E. Spring Street #224  
 Long Beach, CA 90815

NAME .....

COMPANY/ORGANIZATION .....

ADDRESS (CITY, STATE, ZIP) .....

EMAIL .....

PHONE ..... EVENT DAY CONTACT NAME & PHONE .....

Will you bring your own canopy to the event?  YES  NO

What will you promote at your booth?  
 Please list items for approval: .....

Will you serve food or beverages at your booth?  YES  NO

Do you have a branded vehicle you would like  
 to park near your booth?  YES  NO

Do you need electricity?  YES  NO

What will you power up? .....

Volts and amps needed? .....

## PAYMENT DUE

- PLATINUM LEVEL BOOTH (\$750)
- GOLD LEVEL BOOTH (\$500)
- GOODIE BAG INSERT (\$350)
- ELECTRICITY (\$100)
- EARLY REGISTRATION DISCOUNT BY 08/01 (-\$50)

TOTAL DUE \$ .....

## PAYMENT INFORMATION

Make check payable to the Hirshberg Foundation or complete credit card information below. Our Federal Tax ID is #95-464-0311

Check  MasterCard CC# .....

Visa  AMEX EXP DATE ..... CODE .....

NAME AS IT APPEARS ON THE CARD .....

**Waiver (Must be signed):** I hereby release The Hirshberg Foundation for Pancreatic Cancer Research, MTZ Productions, W2 Promotions, UCLA: UC Regents and all Municipal Agencies whose property and/or personnel are used, and other sponsoring or co-sponsoring agency(ies), or individual(s) from responsibility for any injuries or damages I may suffer as a result of my participation in this event. I will additionally permit the use of my name and pictures in broadcasts, telecasts, newspapers, brochures, et al, and also acknowledge that the Vendor Application Fee is non-refundable. As a participating Vendor, I certify that all the information I have provided on this form is true and complete. I have read the Information provided for the event and certify my compliance by signature below.

SIGNATURE ..... DATE .....

