

SALINE CELTIC FESTIVAL
SPONSORSHIP FORM
100 NORTH HARRIS
Saline, MI 48176
734 944-2810

Company Name: _____

Contact Person: _____

Address: _____

Telephone #: _____

Donation Amount: \$ _____ * Check #: _____

Business name to use on printed material:

If you wish to use a logo, please e-mail logo to: Celticfest@cityofsaline.org or Tom@thebanksofsaline.com

Signature

Date

* A receipt will be sent in the mail within 2 weeks.

* Funding needs to be submitted by June 4th to be included in printed material.

THANK YOU FOR YOUR SUPPORT OF THE 2010 SALINE CELTIC FESTIVAL!

