



PRESENTED BY



### **New Display Sponsor Form**

Business/Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

We wish to sponsor the \_\_\_\_\_ display at \$ \_\_\_\_\_

We agree to a Three-Year Sponsorship.

We would like to place a promotional coupon in the **Enchanted Forest Flyer**

Please Invoice. **Note: Payment must be received prior to November 15<sup>th</sup>**

Enclosed is a cheque for \$ \_\_\_\_\_ payable to the **Enchanted Forest**.

We will pay our sponsorship by Credit Card (*Please print clearly*)

Credit Card: \_\_\_\_\_ Card #: \_\_\_\_\_

Cardholder: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

We agree to the above terms and conditions as a Display Sponsor

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

Please complete and return by **Fax to (306) 249-2163** or mail with payment to: **The Enchanted Forest c/o Saskatoon City Hospital Foundation 701 Queen Street Saskatoon, Saskatchewan S7K 0M7**. For more information contact Hugh Vassos at (306) 222-5392 or Email [hvassos@sasktel.net](mailto:hvassos@sasktel.net).

