

CIRCUS VIDBEL FACTSHEET

(Please print & be complete)

TOWN: _____ STATE: _____ SHOW DATE: _____

SHOW TIMES: _____ & _____ AGENT _____

SPONSOR: _____

NAME OF LOT: _____

LOCATION OF LOT _____

TYPE OF CONTRACT (x) () BUYOUT-(Price\$ _____) () _____ STANDARD %

MAIN CONTACT: NAME _____

MAILING ADDRESS: _____ STREET ADDRESS (for UPS shipments)

WORK#: _____ HOME#: _____ CELL# _____

FAX#: _____ E-mail: _____

SECOND CONTACT: NAME _____

WORK#: _____ HOME#: _____ CELL# _____

FAX#: _____ E-mail: _____

ADVERTISING MEDIA

NEWSPAPERS: _____ PHONE: _____

RADIO STATIONS: _____ PHONE: _____

(List top media in area)

NAMES TO BE LISTED ON CERTIFICATE OF INSURANCE:

(Sponsor, Land Owner, Town, School, etc.)

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Ticket Outlets (We recommend 3 to 6 high traffic outlets)

PHONE# FOR TICKET INFO () _____

Please return this Factsheet to: EdCR@optline.net OR Fax to: 888-399-6659

Ed Reich

216 Oakwood Ave.

Bogota, NJ 07603-1722

COMMENTS:

Signature _____ **Date** _____

Download this form on www.circusvidbel.com website - Sponsors Section