

MAFA

2024 Conference November 15-16

Devens Common Center, Devens, MA

Sponsorship Form

Company/Organization Name: *(As it should appear in listings in print and online)*

Contact

Person: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ Website: _____

Sponsor Level:

\$100 Bronze

\$250 Silver

\$500 Gold

\$750 Platinum

*I have verified the above information and enclosed a check in the amount of \$_____ for the above listed Sponsorship. I understand that if this form is received after **October 30, 2024** my business/organization **may not** appear in the printed program, but we will receive all other listed benefits.*

Signed: _____ Date: _____

Please make your check payable to: MAFA

Mail To: MAFA, 109 Shelburne Line Rd, Colrain, MA 01340

PLEASE EMAIL YOUR LOGO: to clubcarguy@yahoo.com

If you have any questions, please contact Mike (413) 834-8208

