



RIVERSEDGE SPONSOR AGREEMENT



COMPANY NAME: _____

Agrees to provide financial sponsorship for the RiversEdge Concert Series 2024 and will receive the applicable sponsorship benefits as described on the RiversEdge website at www.riversedgelive.com. I further acknowledge these benefits will not be delivered until this agreement is signed and sponsorship funds have been accepted and deposited by the Hamilton Community Foundation in care of RiversEdge Concert Fund. I agree to provide and grant limited use of company logo and branding for advertising purposes at RiversEdge Amphitheater.

QUESTIONS: Please call 513-389-8336 or email riversedgeconcerts@gmail.com

PLEASE CHECK APPROPRIATE SPONSORSHIP BELOW AND SUBMIT FORM ON OR BEFORE [FRIDAY, FEBRUARY 17, 2024](#)

- _____ STAGE SPONSOR: 1 SHOW = \$4,000 | 2 SHOWS = \$6,000 | 3 SHOWS = \$7,500
- _____ DIAMOND SPONSOR (ALL Shows): \$8,000 (Order Custom Tent) | \$6,000 (Sponsor Provides Tent)
- _____ PLATINUM SPONSOR (3 Shows): \$5,500 (Order Custom Tent) | \$3,500 (Sponsor Provides Tent)
- _____ GOLD SPONSOR: \$3,000 – Banner at Amphitheater + 3rd Largest Logo on Advertising Materials
- _____ SILVER SPONSOR: \$1,500 – ½ Banner at Amphitheater + 4th Largest Logo on Advertising Materials
- _____ BRONZE SPONSOR: \$750 – ¼ Banner at Amphitheater + 5th Largest Logo on Advertising Materials
- _____ VIDEO ADVERTISEMENT(S): All Shows = \$10,000 | Individual Show(s) = \$1,000 - \$2,500
- _____ Insert Preferred Tent Space # if Diamond or Platinum Sponsor (see map on next page)

Representative Name (PRINT)	Email	Phone
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Authorized Sponsor Signature	Date
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YES | NO (circle one): I am interested in continuing my sponsorship for the 2025 Concert Series. Please contact me regarding sponsorship opportunities for the 2025 Concert Series.

PAYMENT BY CHECK & MAIL

Please MAIL this completed agreement to the address below along with check made payable to [HAMILTON COMMUNITY FOUNDATION](#)

Hamilton Community Foundation
ATTN: RiversEdge Concert Fund
319 N Third Street
Hamilton, OH 45011

ONLINE PAYMENT - [CLICK HERE TO PAY ONLINE](#)

Enter applicable dollar amount for sponsorship
Enter business name as "TRIBUTE" Information
Email [completed sponsor agreement](#) to Adam Helms
adam.helms@hamilton-oh.gov