

# 2023 VCGP Sponsorship Application

Saturday April 29, 2023 through Sunday April 30, 2023, 8:00am to 5:00 p.m.

**Applications must be completed and received by 5:00pm April 7, 2023**



Business Name: \_\_\_\_\_

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

Distributor (if applicable): \_\_\_\_\_

Contact Name(s) at Event: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

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

Website and/or Social Media: \_\_\_\_\_

Please include a High-Resolution File of Your Logo (jpeg and AI preferred):  Jpeg  pdf  AI  Other

Sponsorship Level\*:  Title Sponsor  Presenting Sponsor  Platinum  Gold  Silver  Bronze

*\*Please refer to Sponsorship Benefits Listing for additional details regarding fees and benefits.*

**TERMS:** I am applying as a sponsor for the 2023 Virginia City Grand Prix. I have read and understand the event information, agree to comply with the requirements and enclose payment for the applicable fees. By signing below, you are committed to participating in the 2023 Virginia City Grand Prix and agree to follow the terms as outlined below:

- You agree to be active in Social Media promoting your company/products and participation in the VCGP.
- You understand payment and application is required to hold your website, event materials and event program space.
- If any changes are made to your application, you agree to provide updated information by 4/7/2023.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

*\*By signing this form, you are stating that you are authorized to sign on behalf of the company/organization named above*

**Please mail completed application and payment to VCMC, PO Box 1082, Virginia City, NV 89440.  
Questions? Contact Paul Gross at paulgross@comcast.net or (310) 721-7865 mobile/text**

## CREDIT CARD AUTHORIZATION:

### Payment Information:

- Enclosed, please find my check # \_\_\_\_\_ for \$ \_\_\_\_\_ payable to the Virginia City Motorsports Club (VCMC).
- Please charge my credit card for \$ \_\_\_\_\_:  VISA  MasterCard
- Merchandise or Exchange of Service

Card number: \_\_\_\_\_ Exp. Date (Mo/Year) \_\_\_\_\_ / \_\_\_\_\_ Security Code (CVV) \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_