

FRANCE CINEMA FLORIDE

Sponsorship form

Your name / company name: _____

Your address: _____

Your telephone number: _____ Email: _____

Sponsoring a film *

I would like to sponsor the 2019 Edition of FRANCE CINEMA FLORIDE (FCF):

- | | |
|--|-----------------|
| <input type="checkbox"/> <i>Sponsor a movie!</i> – Opening or Closing film | \$ 3,000 |
| <input type="checkbox"/> <i>Sponsor a movie!</i> – Any film except Opening or Closing film | \$ 2,000 |

Advertising Space *

I would like to purchase the following Advertising Space within the FCF festival program book:

- | | | | |
|---|-----------------|---|-----------------|
| <input type="checkbox"/> 4 th Full page | \$ 5,000 | <input type="checkbox"/> Half page | \$ 1,300 |
| <input type="checkbox"/> 2 nd or 3 rd Full page | \$ 3,500 | <input type="checkbox"/> Quarter page | \$ 700 |
| <input type="checkbox"/> Full interior page | \$ 2,500 | <input type="checkbox"/> Business card size | \$ 400 |

Please make your check payable to French Feeling Films (please write France Cinéma Floride in memo)

* FCF sponsorship details can be reviewed at www.francecinemafloride.com/support_us.htm

Date: _____ Signature: _____