

Hot Springs Village

Hot Springs Village Property Owners' Association
895 DeSoto Boulevard
Hot Springs Village, AR 71909

Committee Chair: John Tidquist - 501.915.8883
Staff Liaison: Linda Mayhood - 501.922.5532

**THE
RIGHT FIT**



ANNIVERSARY CELEBRATION

APRIL 17-25, 2010

Be a Part of History

Hot Springs Village is planning its 40th Anniversary Celebration for 2010, and we invite you to be a part of the week-long celebration. Events are scheduled for April 17 through April 25 and include golf tournaments, dances, picnics, music, productions, dinners, fireworks and more.

You can be a part of the celebration by sponsoring or co-sponsoring one of these events. Sponsorship begins at \$50.00 for an individual and \$100.00 for a business. Sponsorship includes your name on all promotional materials and publicity for the event as well as a listing with your logo in the official 40th Anniversary Celebration Program.

Enclosed is the Sponsor Form. If you need any additional information please mark the form and a member of the committee will contact you to answer your questions.

Thank you,

John Tidquist

John Tidquist
Chairman
40th Anniversary Committee



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Sponsor Form

I would like to sponsor an event for the 40th Anniversary Celebration of Hot Springs Village. **Please bill my business as indicated below in January 2010.**

I would like to sponsor an event for the 40th Anniversary Celebration of Hot Springs Village. **My check is enclosed.**

Organization/Name: _____

Contact Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

City: _____ State: _____ Zip: _____

Email Address: _____

I am an:
Individual Sponsor: _____ \$50.00 _____ \$75.00 _____ \$100.00 _____ \$Other
Business Sponsor: **Bronze** _____ \$100.00 **Silver** _____ \$250.00 **Gold** _____ \$500.00 **Platinum** _____ \$1,000.00+

Payment Authorization:

Check One: _____ Check _____ Cash _____ Amount Due: _____

_____ Credit Card (Visa, Mastercard, Discover) Please complete the information below

Name as it appears on credit card: _____ Phone#:(____) _____

Address: _____ City: _____ State: _____ Zip: _____

Credit Card #: _____ Expiration Date: _____ Three Digits on Back: _____

Signature: _____