



2CBD FM 105.9 Glen Innes / 91.1 Deepwater

P.O. Box 129 GLEN INNES 2370 Phone: 6732 1270 Fax: 6732 1490

WWW.2cbdonline.com

SPONSORSHIP FORM

TO BE COMPLETED BY SPONSOR OR REPRESENTATIVE

NAME FOR

ADVERTISEMENT: _____

ADDRESS: _____

PHONE: _____ FAX: _____ ABN: _____

CONTACT PERSON: _____

CURRENT INTERNET SITE : Yes / No http://www. _____

CURRENT EMAIL ADDRESS: Yes / No

@

Do you want link to website & Email from 2cbd.com.au website? Yes / No

ANNOUNCEMENT DETAILS:

Start Date: _____ Finish Date: _____ Option: _____ Mthly. Rate \$ _____

Preferred Times: _____ Special Arrangements: _____

Please note: All sponsor promotions are for weekdays only unless weekend options selected

MAIN FEATURES OF

BUSINESS: _____

ANY SPECIALS / EVENTS / ACTIVITIES TO BE MENTIONED

PLEASE SELECT PROMOTION PLAN

(Our representative can determine cost of sponsorship rates available.)

Cheques/money orders payable to **DEEPWATER & DISTRICTS COMMUNITY FM RADIO (Inc)**

I accept the trading terms of 2CBD. Special programs cannot be terminated early. I understand that no refunds can be given. The sponsorship announcement will be redone if I am unhappy with it, and may be changed up to three times per year with no extra cost.

Signature _____ Print name _____

OFFICE USE ONLY

AUTHORISED BY: _____

PAYMENT RECEIVED: Yes / No AMOUNT \$ _____ Receipt No: _____

Type of Payment: Cash / Cheque (Name _____ Number(_____)

Other (specify) _____

START DATE: ____ / ____ / ____ FINISH DATE: ____ / ____ / ____ (Form version 5 - 14/8/09)

SPECIAL PROGRAM DETAILS _____