



## 2019 Sights & Sounds Festival Confirmation of Support

### Confirmation of Support

Business/Organization: \_\_\_\_\_

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

Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

I wish to make a contribution to the 2019 Sights & Sounds Festival in the amount of  
\$\_\_\_\_\_ and recognize that for this contribution we will receive the sponsorship benefits of

\_\_\_\_\_  
(Please indicate sponsorship package here)

Additional Notes: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Please return your form to:

Kendra Mantler  
Community Improvement Partnership Office  
e [cip@hanover.ca](mailto:cip@hanover.ca)

### Or by mail

Hanover Sights & Sounds Festival  
Attention: CIP Office  
269 7<sup>th</sup> Avenue  
Hanover ON  
N4N 2H5