**Lenoir County**

**Chamber of Commerce**

**Business After Hours Host Agreement**

**Date of Event:**

**Host(s):**

**Event Address:**

**Contact Person:**

**Contact Phone:**

**Contact Email:**

My name and date verifies that I have read the attachment and understand the arrangements described

and agree to them.

**Host name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :**

**Schedule:**

**2-4 Weeks Prior to Event e**mail the following information to **sbartlett@kinstonchamber.com**

[ ]  Host logo’s

[ ]  Approximately 150-word story of host(s) (Include history, interesting information, pricing/packages

 available, etc. This will be used in the email to membership and in program insert)

[ ]  Contact Chamber staff with questions and concerns

**One Week Prior to Event**

[ ]  Secure door prizes. (2-3 door prizes valued at $10-20 are typically offered.) If your business has logoed

 items (umbrellas, cups, magnets, coupons, etc.) they make fun giveaways as well.

[ ]  Provide name of host representative(s), including title, to speak during program.

[ ]  Approve program

 **Please contact Sarah Bartlett at 252-527-1131or email to sbartlett@kinstonchamber.com with any questions or concerns.**

For office use only

Chamber President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lenoir County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ambassadors: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City of Kinston: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_