



Fort Bend County Fair & Rodeo 2024 Sponsorship Contract

Individual/Company Name _____
(Please print Individual/Company Name as it should appear.)

Contact Person _____

Mailing Address _____

City, State, Zip _____

Phone # _____ Alt # _____

Email _____

It is hereby-agreed that _____ (Sponsor) will provide \$_____ to the Fort Bend County Fair Association (FBCFA) in exchange for participation as a Sponsor at the 2024 Fair and Rodeo.

Sponsor may specify funds to a specific award / department / event or to the general fair fund.

General Fair Fund

Specific award / department / event _____

The Sponsor is hereby eligible for all benefits and privileges as outlined in the Sponsor Book.

I DO wish to receive any benefits and/or privileges provided by the FBCFA.

Additionally, I DO wish to receive a sponsor plaque.

I DO NOT wish to receive any benefits and/or privileges provided by the FBCFA.

Payment Method _____ Invoice Me _____ Check Enclosed _____ Credit Card

Please call 281-342-6171 to pay with credit card by phone

*****Signature** _____ Date _____

Sponsor Signature/Responsible Party

By signing this contract, I acknowledge and agree to provide payment as stated.

*****Sponsorships must be paid before benefits will be received.*****

Please sign and return form along with payment to:

Fort Bend County Fair Association
PO Box 428 Rosenberg, TX 77471
281.342.6171 / Fax 832.595.0808

501(c)3 Organization