



Fabric-Chicks Creative Oasis
 1511 US Highway 395 N
 Gardnerville, NV 89410
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 775.267.0204  
 beth@fabric-chicks.com  
 www.fabric-chicks.com

# Sponsor Contract

**JUNE 11, 12, 13, 2026**

**Quilt Show Reno**  
 Grand Sierra Hotel - Silver State Pavilion  
 Reno, NV 89595

## SPONSOR INFORMATION

*Please Print:*

Contact Name \_\_\_\_\_ Web URL \_\_\_\_\_

Company Name (as you would like it to appear) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

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

The Sponsor agrees that upon acceptance, this application shall be deemed to form a binding contract between the Sponsor and the Organizer, and the Sponsor agrees to abide by the Terms and Conditions of Sponsorship available on request, which form an integral part of the contract between the Organizer and the Sponsor. The Contract is deemed binding when the Organizer receives a non-refundable payment or executed and signed contract.

## PAYMENT DETAILS

| Total Sponsorship                 | Amount |
|-----------------------------------|--------|
| PLATINUM SPONSORSHIP PACKAGE      |        |
| GOLD SPONSORSHIP PACKAGE          |        |
| SILVER SPONSORSHIP PACKAGE        |        |
| SHOPPING TOTE / BAG SPONSORSHIP   |        |
| CLASSROOM MACHINE SPONSORSHIP     |        |
| SPECIAL QUILT DISPLAY SPONSORSHIP |        |
| NEWSLETTER SPONSORSHIP            |        |
| <b>TOTAL</b>                      |        |

## QUESTIONS & INFORMATION

Beth Watts 775.267.0204 beth@fabric-chicks.com

### PAY BY CHECK:

Please make checks out to Fabric-Chicks Creative Oasis.

### PAY BY INVOICE:

Payments must be made in full on or before 60 days from invoicing.

### PAY BY CREDIT CARD:

If paying by card please fill in the information below.

***Thank You for your Sponsorship  
 You make Quilt Show Reno possible!***

## CREDIT CARD INFORMATION

Card Full Name \_\_\_\_\_ Card Type:  Visa  MasterCard  Discover  AMEX

Card Number \_\_\_\_\_ Exp. \_\_\_\_\_ CVV \_\_\_\_\_

Cardholder Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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