

Grow Poseyville Supporter Form

Company Name: _____

Contact Person: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Email: _____

Company Website: _____

of employees (Full Time): _____ (Part Time): _____

Describe your business: _____

Applicant Signature: _____

Date: _____

Supporter Level:

- _____ Individual: \$100/year
- _____ Business (10 or less FTE employees in Poseyville) or Nonprofit: \$250/year
- _____ Business (11-50 FTE employees in Poseyville): \$500/year
- _____ Business (51-100 FTE employees in Poseyville): \$750/year
- _____ Partner Level \$1,000/year
- _____ Visionary Level \$2,500/year

Grow Poseyville Supporter Benefits:

- Listing in official supporter directory
- Listing on the website
- Feature in email to supporters
- Social media feature
- Event sponsorship
- Ribbon cutting event
- Grow Poseyville signage/decal