

# BUSINESS PARTICIPATION AGREEMENT FORM

Business Name for Promotion: \_\_\_\_\_

Name of Legal Entity (for tax purposes): \_\_\_\_\_

Contact Name & Email: \_\_\_\_\_  
*required for the most up-to date correspondence regarding Downtowns Go Pink participation*

Business Address: \_\_\_\_\_  
*if multiple locations, please attach a list of all locations/addresses/managers*

Contact Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Accts Payable Contact & Email: \_\_\_\_\_

The Downtowns Go Pink event will be publicized in all related materials including:

- **Press Releases** sent to media partners in service area
- **Social Media** including Facebook (~6K+ fans), Twitter (2.5K+ followers) and Instagram followers, using the hashtag **#KomenFLGoPink**
- **Email Communications** sent to 58K+ to Komen Florida supporters
- **Downtowns Go Pink webpage** (online at [www.komenflorida.org/events/gopink](http://www.komenflorida.org/events/gopink))

**Please tell us how your business intends to donate:**

\_\_\_\_\_ 10% of one day's sales \_\_\_\_\_ day/date

\_\_\_\_\_ Other: \_\_\_\_\_  
*(Examples) \$2 per food or beverage item sold for the month; 10% of pink pashminas sold for the month*

**Would you like information on other ways to support Susan G. Komen Florida, including forming a team for the Race for the Cure on January 25, 2020 or becoming a sponsor?**

\_\_\_ Yes \_\_\_ No

If yes, please provide contact name and information:

## Payment

You will be emailed a payment reminder by November 8, 2019. All monies are due in our office **no later than Wednesday, November 27, 2019.**

**Please make check payable to:** Susan G. Komen Florida. Include your business's name in the memo.

**Mail donation to:** Susan G. Komen Florida, At Good Samaritan Hospital, 1309 N. Flagler Dr., 5th Floor, West Palm Beach, FL 33401

**Agreed and Accepted** (required to participate)

Susan G. Komen Florida is not liable to any party or vendor for any fees, costs or payments of any kind, including cost or payments incurred pursuant to this Agreement. Applicant agrees to indemnify and hold harmless Komen Organization against any third-party claims arising in connection with the indemnifying party's negligence; or any service or product sold or provided by the indemnifying party in connection with the Downtowns Go Pink event.

Print Name \_\_\_\_\_ Title \_\_\_\_\_

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

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

Please complete and return form(s) by **September 20, 2019** at 5 pm to [info@komenflorida.org](mailto:info@komenflorida.org) or

Susan G. Komen Florida, 1309 N. Flagler Drive, 5<sup>th</sup> Floor, West Palm Beach, FL 33401

**Thank you for partnering with Komen Florida to save lives!**