

Motif No. 1 Day



A CELEBRATION OF MOTIF NO. 1

Built by Fisherman, Named by Artists, Loved by All

MAY 18, 2024

ROCKPORT, MA

Rain Date: May 19

Become a Sponsor of Motif No. 1 Day

Join us for Motif No.1 Day to celebrate Rockport's unique artist destination with a seaside and fishing culture featuring the famed fishing shack, which for generations has been a favorite subject for painters and photographers.

Sponsorship Opportunities

Presenting Sponsor - \$2,500 (one only)

- Opportunity to host a booth at the event
- Opportunity to provide promotional giveaway at event (e.g., swag bag, branded products, etc.)
- Logo prominently included on all printed promotional materials
- Logo included in all event-specific e-blasts and social media posts
- Logo prominently displayed as Presenting Sponsor on Chamber and RockportUSA.com event pages with link to company website
- Recognition as Presenting Sponsor in all press releases
- Receive dedicated Sponsor Appreciation Post on social media

Music Stage Sponsor - \$1,500 (one only)

- Company logo included on all printed promotional materials (Including A-Frame at event)
- Company logo listed on event web pages (capeannchamber.com & rockportusa.com) with link to company website
- Company name included in all event-specific e-blasts
- Recognition as as Stage Sponsor in all press releases
- Receive dedicated Sponsor Appreciation Post on social media

Beth Israel Lahey Health 
Addison Gilbert Hospital

Performing Arts Sponsor - \$600

- Company name featured on A-Frame at event, on event brochure, and event web pages
- Receive dedicated Sponsor Appreciation Post on social media

Map Advertiser - \$250

- Company name and logo listed on event brochure and event web pages
- Receive Advertiser Appreciation Post on social media

SOLD

**Yes! Sign Us Up to Sponsor the
2024 Motif No. 1 Day**



- Presenting Sponsor - \$2,500 (one only)**
- Music Stage Sponsor - \$1,500 SOLD**
- Performing Arts Sponsor - \$600**
- Map Advertiser - \$250**

Contact Details

Business: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Telephone: _____

Payment Details

- Check Enclosed # _____
- Credit Card (Visa, MasterCard, Discover, or American Express)

Cardholder's Name: _____

Card Number: _____

Security Code (back of card): _____ Expiration: _____

Billing Address: _____

Billing Zip Code: _____

Signature: _____ Date: _____

The Chamber will issue an invoice upon confirmation.

Questions: Please contact the Chamber at colleen@capeannchamber.com or call 978-283-1601

Mailing Address: 24 Harbor Loop, Gloucester, MA 01930