



Souvenir Program Advertiser Application

Name: _____

Business or Entity Name: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Physical Address: _____

Contact Phone: _____ Business Phone: _____

Email: _____ Website: _____ Facebook: _____

Business Motto or Tagline (if any):

What ad size do you want to place in this year's special 10th Anniversary Souvenir Program?

CHOICE	SIZE	MEASUREMENTS	PRICE
<input type="checkbox"/>	1	2.5" H x 4" W	\$15
<input type="checkbox"/>	2	4" H x 5" W	\$25
<input type="checkbox"/>	3	8" H x 5" W	\$50
<input type="checkbox"/>	4	8" H x 10" W	\$100

Additional information, notes, or comments: _____

Send any ad or photo you want us to place in our special 10th Anniversary Souvenir Program to: admin@alohapolyfest.com

Please retain a copy for your records, and return this signed "Advertiser Application" with your Payment.

Date: _____

Signed

CHECK or MONEY ORDER PAYABLE TO: Charles Hamer

RETURN BEFORE JULY 31, 2022: Aloha Poly Fest c/o Charles Hamer • 499 Vienna St. • San Francisco, CA • 94112