

JOINT FOREIGN CHAMBERS FESTIVE MIXER

American Chamber of Commerce of the Phils., Inc. – Visayas Chapter
The Canadian Chamber of Commerce of the Phils., Inc. – Visayas Chapter
European Chamber of Commerce of the Phils., Inc. – Cebu Branch Office



Dear members and partners,

The Joint Foreign Chambers (JFC) Visayas Chapter Offices will be hosting a **Joint Festive Mixer** on **Friday, December 6, 2019 from 6:00 pm to 9:00pm at the Events Plaza of the Radisson Blu Cebu.**

This Mixer will provide members of our foreign chambers an opportunity to meet other members, to expand business networks, or just to mingle and mix at a worthwhile event while enjoying a sumptuous spread of canapes and cocktails.

In this regard, we would like to extend the opportunity for you to partner with us in this event as follows:

INVESTMENT VALUE	P20,000	P10,000	P 5,000
<i>Set-up space (1 IBM table will be provided)</i>	✓		
<i>Option for maximum 2 minutes AVP loop during event</i>		✓	
<i>Inclusion of company logo in all marketing collaterals and invites to foreign chambers (300 dpi jpeg file)</i>	✓	✓	
<i>Option to display banner at a designated area at the venue (standee/roll-up banner only)</i>	✓	✓	
<i>Inclusion of company logo in the event's AVP loop</i>	✓	✓	
<i>Recognition during the program</i>	✓	✓	✓
<i>Copy of attendees' database</i>	✓	✓	✓
<i>Complimentary ticket to the event</i>	2	1	1

With your company's valued support, this event will surely be a great success and more importantly, meaningful to your business interests.

If you have any questions or need additional information, please do not hesitate to contact Ms. Jillian Sitchon at tel. nos. (032) 494-9585, +639954503383, and +639192480889 or email jillian.sitchon@eccp.com

Yours Sincerely,

Florian Gottein
ECCP Executive Director

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SPONSORSHIP AGREEMENT FORM

This constitutes an Agreement between ECCP Cebu and the Sponsor, and becomes binding upon acceptance.

Amount of Sponsorship: ___ P20,000 ___ P 10,000 ___ P 5,000

SPONSOR INFORMATION

Company: _____
Name of Principal Officer: _____
Designation: _____
Company Address: _____
Tel. No.: _____
Fax No.: _____
Email Address: _____

(Signature over printed name)