



**Matawan-Aberdeen  
Chamber of Commerce**  
*Helping to Build a Strong Business Community Since 1968*

P.O. Box 522  
Matawan, NJ 07747-0522  
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[info@macocnj.com](mailto:info@macocnj.com)  
[www.macocnj.com](http://www.macocnj.com)

# 16th ANNUAL REGIONAL BUSINESS EXPO APPLICATION

**Tuesday, March 28, 2017**

**6:00 pm – 9:00 pm**

**Set up beginning at 5:00 pm**

**The Reception Center at St. Clement  
172 Freneau Ave. (Rt 79) Matawan**

BUSINESS NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ CELL (for day of event) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Circle choice:**

**Presentation Sponsor \$250** (limited number of spots) includes table\*, pasta before event, 15 minutes of presentation time in Showcase area, and your logo on print and social media advertisements

**Marketing Sponsor \$200** includes table\*, pasta before event and your logo on print and social media advertisements

**Table only \$100** vendor table\* and pasta before event

\*Electricity needed \_\_\_yes \_\_\_no. \*Tables (6') provided - include linen tablecloth & 2 chairs.

**Enclosed, please find our check in the amount of \$ \_\_\_\_\_  
made payable to Matawan-Aberdeen Chamber of Commerce  
or charge my credit card for \$ \_\_\_\_\_**

Credit Card #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

3 or 4 digit Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

If you prefer, you can call the office with your credit card information.

**Mail completed application & payment to PO Box 522, Matawan, NJ 07747  
Please contact the Chamber office at 732-290-1125 or [info@macocnj.com](mailto:info@macocnj.com) if you have any questions.**

**No refunds will be given after March 14th**

FOR OFFICE USE ONLY: Check:# _____				Amount: \$ _____	Date Rec'd: _____	Initials: _____
Paid by Credit Card		MC	Visa	AMEX	Discover	Amount: \$ _____
		Auth # _____		Date: _____	Initials: _____	