



Wimberley Texan Football 2017 Broadcast



Home & Away games broadcast on KOWO 104.1FM, WimberleyRadio.org & Sun Radio App

“Friday Night Football” Underwriting Opportunities

Broadcast Founder Sponsor Available to **only four** business or community leaders Minimum of 6 announcements in each game premiere placement with logo & link on WIMBERLEYRADIO.ORG

\$300/game x 10 games = \$3000.00 per season

- * Billed equally at \$750.00 down for August, then \$750.00 each month in September, \$750.00 October, \$750.00 November
- * Prepay season -5% discount =\$2850.00

Touchdown Minimum of 3 announcements during each game with logo & link on WIMBERLEYRADIO.ORG

\$150/game x 10 games = \$1500.00 per season

- * Billed equally at \$375.00 down then \$375.00 in September, \$375.00 in October and \$375.00 in November
- * Prepay season -3% discount =\$1455.00

First and 10 Minimum of 2 announcements during each game with smaller logo & link on WIMBERLEYRADIO.ORG

\$125/game x 10 games = \$1250.00 per season

- * Billed equally at \$312.50 down then \$312.50 in September, \$312.50 in October and \$312.50 in November
- * Prepay season -1% discount =\$1237.50

Special Teams * **Pre Game** * **Half Time** * **Post Game** * **Play of the game** **PICK ONE**

\$100/game x 10 games = \$1000.00 per season Minimum of 1 premium fixed position feature announcement & link on WIMBERLEYRADIO.ORG

- * Billed equally at \$250.00 down then \$250.00 in September, \$250.00 in October and \$250.00 in November

Field Goal Minimum of 1 announcement during each game

\$75/game x 10 games = \$750.00 per season

- * Billed equally at \$187.50 down then \$187.50 in September, \$187.50 in October and \$187.50 in November

Regular Season Schedule: 9/1 @ LaVernia, 9/8 vs. Giddings, 9/15 vs. Lampasas, 9/22 @ Canyon Lake, 9/29 @ Fredericksburg, 10/6 vs. Boerne, 10/13 vs. Bandera, 10/20 @ Llano, 10/27 vs. Navarro, 11/10 @ Hondo

Sign me up for the PLAYOFFS and let me lock in my rate: I agree to sponsor playoffs at my same per game spend level.

Business Name _____ Address _____

Contact Name _____ Phone # _____ E-mail _____

Accounts Payable Contact Name _____ Phone # _____ E-mail _____

Package _____ TOTAL Amount \$ _____ To Be Paid As Follows _____

Check #: _____ Credit Card # _____ Exp _____ CVV _____ CC Zip Code _____

Station Rep: _____ Notes: _____

Agent for Business Underwriter Signature X _____ Date: _____

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