

WGEN-FM 88.9

WGEN-FM 88.9 FM -Wild World Media Sponsorship Agreement

285 Industrial Dr. Suite 200 Wauconda, IL 60084

Business Information	
Business Name: _____	
Business Address: _____	
Telephone: _____	Fax: _____
Billing Contact Name/Position: _____	
Billing Email: _____	
Billing Address (if different from above): _____	
Notes: _____	

Sponsored Programming	
Placement - Please fill in the information below; enter N/A as necessary. Please check one. Note that when sponsoring a specific program that pre-empting of the program may be needed in order to bring special presentations. If this were to happen during a specific sponsored program, your sponsored program will be moved and added to a later date.	
_____ Specific program. List program name(s):	_____ Prime (5:00 am to 11:59 pm) _____ Premium
_____ General Placement	
Number of Spots: _____	Unit Rate Per Spot: _____ Production Fee: _____
Frequency and Schedule: _____	
Discount/Coupons: _____	
Payment/Billing Method (check one):	
_____ First Installment (Check # _____) Renewable at same rate for 6 months from date of agreement	
_____ Cash Amount	
_____ Monthly billing (minimum \$100.00 first month required in advance)	

COPY	
Information about your company, i.e.: products used, brand names, hours of operation, website, and phone number for the spot. Promotions, incentives, offers, products/services sold.	

Frequency and Schedule: _____	
Radio Spots Begin: _____	Spots run until: _____

*Special Agreement/Terms: _____		

Initials: _____	Initials: _____	Initials: _____
Sponsor	WGEN Underwriter	WGEN Underwriting Manager

By signing, I agree to the terms and guidelines for sponsorship on WGEN-88.9 FM and that the agreement must be countersigned by the station management authorized to approve underwriting.

Sponsor Signature: _____ **Date:** _____

WGEN Underwriter Signature: _____ **Date:** _____

WGEN Underwriting Manager Signature: _____ **Date:** _____