



Saturday, October 31, 2026
Check-in 8:00 AM | Race Starts 9:00 AM

3.4 or 6.8 Mile Run or 1 Mile "Pit Road" Walk
 at Watkins Glen International, 2790 County Route 16, Watkins Glen

REGISTER ONLINE at ArcGrandPrixRun.org
 INFO: 607.734.6151 - THIS IS A RAIN OR SHINE EVENT!



This fundraising event benefits people with intellectual and developmental disabilities supported by The Arc Chemung-Schuyler.

SPONSORSHIP OPPORTUNITIES

Yes, Sign Me Up For:	<input type="checkbox"/> Champion Sponsor (1 available) \$2,500	<input type="checkbox"/> Medallion Sponsor (1 available) \$1,000	<input type="checkbox"/> Race Timing Sponsor (4 available) \$750	<input type="checkbox"/> Runners' Fuel Tent Sponsor (1 available) \$500	<input type="checkbox"/> Water Station Sponsor (1 available) \$500	<input type="checkbox"/> Mile Marker Sponsor (3 available) \$350	<input type="checkbox"/> T-Shirt Sponsor \$200
Company banner displayed at event	✓ at registration area			✓ at runner's fuel table	✓ at water station on course		
Company logo placement	✓ Premium Placement	✓ printed on all medallion neck ribbons	✓ printed on all race bibs			✓ displayed on a mile marker sign	
Promotional media appearances and in event e-newsletters	✓ Premium Placement	✓ Placement in any medallion teaser promotions					
Social media recognition through Facebook and Instagram	✓ Premium Placement in all posts	✓ 10 posts	✓ 5 posts	✓ 5 posts	✓ 5 posts		
Company logo appearances: Race Shirt, Website, and Digital Program	✓ Premium Placement	✓	✓	✓	✓	✓	✓
Recognition by event emcee	✓						
Complimentary race registrations	4	2	2	2	2	1	1

✓ Opportunity to set up a table at event to pass our flyers, coupons, etc. (staffed by sponsor)

Commitment Deadline:

September 30, 2026

✓ Company provided item in participant bags (coupons, pamphlet, swag, etc.)

Please e-mail a high-resolution file of business logo and/or program ad to TokarCK@arcofcs.org for use in marketing materials as outlined in benefits of selected sponsorship level. Questions? 607.734.6151 ext. 116.

COMPANY NAME (as it should appear in Event Program) _____ CONTACT PERSON _____ CONTACT PHONE _____ CONTACT EMAIL _____ MAILING ADDRESS _____ CITY _____ STATE ZIP _____	PAYMENT INFORMATION	
	<input type="radio"/> Mail-in: Mail completed application & payment to The Arc Chemung-Schuyler, 711 Sullivan Street, Elmira, NY 14901 → Make Checks Payable to The Arc	
	<input type="radio"/> Credit Card: I authorize the use of my credit card account.	
	NAME AS IT APPEARS ON CARD _____	
	CREDIT CARD # _____	
	EXP. DATE SEC. CODE _____	
	CARD HOLDER SIGNATURE _____	