



**Return completed form to:**  
 WCNY Connect Card Services  
 P.O. Box 2400, Syracuse, NY 13220  
 EMAIL connect.card@wcny.org  
 PH 315-453-2424 FAX 315-451-8824

## Partnership Agreement

COMPANY INFORMATION (for publication)		
Company Name:		
Street Address:		
City:	State/Province:	Postal Code:
Phone:	Fax:	
Website:		
MAILING ADDRESS (if different)		
Street:		
City:	State/Province:	Postal Code:
PRIMARY CONTACT INFORMATION (for internal purposes only)		
Name:	Phone:	
Email:		

### I. Marketing Promotion of the Connect Card Benefits Program

*Partners featured in Connect Card program promotions on a rotating basis.*

**Television:** Connect Card program featured on-air, during regular programming on all of WCNY’s TV channels throughout the year (current lineup: WCNY PBS, Create, GLOBAL CONNECT, WiCKNeY KIDS, and HowTo).

**Radio:** Connect Card program featured on all of WCNY’s radio stations. (Classic FM, HD2, and HD3).

**Web & App:** Detailed listing with photos and description (that you provide) on the webpage at [wcny.org/connectcard](http://wcny.org/connectcard) and on the Connect Card Mobile App. Geo-targeting push notifications will be delivered to users near your location.

**E-communications & Social Promotion:** through WCNY’s weekly e-Guide and social media.

### II. Terms of Participation

**Your Contribution:** Your agreement is to annually provide card holders with a **single-use** (indicate with an “x”):

<input type="checkbox"/> 2-for-1 entrée	<input type="checkbox"/> 2-for-1 admission	<input type="checkbox"/> Other:
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**Right to Restrict Offering:** check to exclude benefits  on major holidays  
 in conjunction with other specials you offer

**Listings:** Online listings are initiated upon receipt of your completed profile form and may be updated at any time upon request. Connect Card Brochure listings are updated each time the brochure is printed.

**Term of Agreement:** This agreement will continue until such time as you, or WCNY, chooses to cancel. You may cancel at any time with 30-day’s notice.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

WCNY Confirmation: \_\_\_\_\_ Date \_\_\_\_\_

*Thank you and welcome to WCNY’s Connect Card!*