

**North Carolina Alcoholic Beverage Control Commission
Industry Promotion Approval Form**

Please fill out completely – more information is better. (address to include city, state and postal code)

Industry Member: _____
Address: _____
Contact Person: _____ Title: _____
Email: _____ Telephone number: () _____
If multiple industry members, check this box and complete Attachment A

Name of Event or Promotion: _____
Date(s): _____ Times: _____
Location of Event (business name): _____
Address: _____
County: _____ Location holds retail ABC permits: Y _____ N _____

Sponsored Organization (if any): _____
Contact Person: _____ Telephone or email: _____
Is a Non-profit Organization: Y _____ N _____ Non-profit obtaining ABC Special One-Time Permit: Y _____ N _____
Will alcoholic beverages be: (1) _____ sold via cash sales; (2) _____ given away at a ticketed event; (3) _____ given away with no requirement [beyond being 21 years of age]
Which organization will maintain possession and control of, and monitor the service of, the alcoholic beverages?

What specifically will the industry member bring / provide / donate / sell / lend, and to which organization?

Describe advertising / promotional materials (include examples or photographs if possible), the location of said materials and which organization will pay for each of the materials (to include, but not limited to, banners, aerials, inflatables, signs, radio, newspaper, internet, etc.) _____

List other co-sponsors, supporters, participants (use additional sheets if necessary or attach promotional materials)
With ABC permits: _____

Without ABC permits: _____

Industry Member: _____

Event: _____ Date: _____

Please provide any additional information not included on first page:

Commission Use Only:

Conditions or restrictions on approval, reasons for disapproval, other comments:

Attachment A

Industry member: _____

Contact person / telephone or email: _____

Contribution / donation etc.: _____

Industry member: _____

Contact person / telephone or email: _____

Contribution / donation etc.: _____

Industry member: _____

Contact person / telephone or email: _____

Contribution / donation etc.: _____

Industry member: _____

Contact person / telephone or email: _____

Contribution / donation etc.: _____

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