Form Submission



## Marketing & Regional Tourism/Attractions Partnership Program

I am interested in participating in the Mohegan Sun Concord Marketing & Regional Tourism/Attractions Partnership Program.

Proprietor or Proprietors Representative: Rhonda Owens, Marketing Director **Business Name:** Jeff Bank **Business Address:** 4866 State Route 52 City: Jeffersonville State: NY Zip: 12748 Phone: 845-482-4000 Cell: 845-482-5021 Email: rowens@jeffbank.com Please check all that apply below, and supply additional details as requested. I am a local business owner in Jeffersonville, Sullivan . I am interested in providing goods and/or services to Mohegan Sun Concord. (3) Those goods and/or services may include: Banking, Financial I am a local business owner in Jeffersonville, Sullivan . I agree to explore partnership opportunities with Mohegan Sun Concord to draw patrons to the region. (4) I represent a local restaurant, small business, hotel, attraction, and/or a retail facility in Jeffersonville, Sullivan . I am interested in engaging in cross-marketing strategies with Mohegan Sun Concord. (5) I represent a live entertainment venue in [Municipality, County] . I am interested in pursuing an agreement with Mohegan Sun Concord specific to cross-marketing and other promotional partnership opportunities. (2.a) I understand that by submitting this form, I am only expressing interest in the Mohegan Sun Concord Marketing & Regional Tourism/Attractions Partnership Program. This is not a binding agreement. I understand that I will be contacted in the future to complete program terms and to potentially enter into a formal agreement with Mohegan Sun Concord. Signature: Rhonda Owens Date: 06/18/2014