

SPONSORSHIP AGREEMENT

	QTY	UNIT	TOTAL
<input type="checkbox"/> I WOULD LIKE TO SPONSOR THE EVENT			
<input type="checkbox"/> TITLE SPONSOR		\$10,000.00	\$ _____
<input type="checkbox"/> PRESENTING SPONSOR		\$5,000.00	\$ _____
<input type="checkbox"/> HOSPITALITY SPONSOR		\$2,500.00	\$ _____
<input type="checkbox"/> GOLD SPONSOR		\$1,000.00	\$ _____
<input type="checkbox"/> SILVER SPONSOR		\$500.00	\$ _____
<input type="checkbox"/> BRONZE SPONSOR		\$250.00	\$ _____
		TOTAL ENCLOSED	\$ _____

I WOULD LIKE MY SPONSORSHIP NAME TO READ AS:

I WOULD LIKE TO DONATE THE FOLLOWING ITEM(S) TO THE SILENT AUCTION:

VALUED AT \$ _____
VALUED AT \$ _____

I WOULD LIKE TO DONATE THE FOLLOWING ITEM TO THE FAVOR BAGS:

CONTACT INFORMATION

NAME _____
 COMPANY NAME _____
 PRIMARY ADDRESS _____
 CITY, STATE ZIP _____
 PHONE _____ FAX: _____
 EMAIL _____

PAYMENT INFORMATION

CHECK PAYABLE TO "CHAMPIONS OF HOPE FOUNDATION" CREDIT CARD
 CREDIT CARD TYPE: _____
 CREDIT CARD # _____
 3 DIGIT SEC. CODE: _____ EXP. DATE _____

PLEASE MAIL YOUR PAYMENT ALONG WITH THE COMPLETED FORM TO:

CHAMPIONS OF HOPE
 2074 ARLINGTON AVENUE
 COLUMBUS, OH 43221

PLEASE CONTACT MEGAN LEAMON AT 614.222.4888 WITH ANY QUESTIONS OR CONCERNS.

THANK YOU FOR YOUR SUPPORT!