



2026 Pinal Family Resource Guide SPONSOR APPLICATION FORM

Pinalearlychildhood.com



"The resource guide has been extremely helpful as our case managers are able to give this information to the families we serve. It provides information for tons of services that our staff did not even know were available. We reference the guides, hand out the guides, and make referrals from the guides. I love the guides!!"

Jennifer Enders
Clinical Advisor II, Children's Department
Horizon Health and Wellness

"We utilize our resource guides all the time! Our police officers, detectives, police aides, records staff and volunteers are able to quickly locate and reference the appropriate community services needed by citizens we encounter. People look to law enforcement for help every day, but we don't always have the answers. Thanks for making it easier for us!"

Sergeant Thomas Anderson
Public Information Officer
Casa Grande Police Department

YES! We will sponsor the 2026 Pinal Family Resource Guide.

Please indicate your level of support:

☐ **Gold** \$2,000

Full-page ad and recognition on the thank you page

☐ **Silver** \$500

Half-page ad as featured listing and recognition on the thank you page

☐ **Bronze** \$250

Quarter-page ad as featured listing and recognition on the thank you page

Name of Sponsoring Organization

Contact Name

Title

Mailing Address

City

State

ZIP Code

Contact E-mail

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NOTE: By submitting this sponsorship form, the sponsoring organization acknowledges that all sponsorship funds are provided voluntarily and from lawful, non-restricted sources. All funds will be received and managed by Rebuild Superior (EIN is 81-2688417), serving as the fiscal sponsor for this project. Sponsorship contributions are non-refundable and will be used solely to support the purposes outlined in this sponsorship opportunity. Upon receipt and approval of the completed sponsorship application, Rebuild Superior will generate an invoice and W-9 form for payment processing. Submission of this form does not imply endorsement, partnership, or exclusive affiliation with Rebuild Superior or the associated project organizers.

Authorized Signature _____ Date _____

Please e-mail a copy of this completed form to Rebuild Superior at: office@rebuildsuperioraz.org

Upon receipt, you will receive an invoice and other documentation to confirm your participation. Thank you.