



## SPONSORSHIP FORM

### Sponsoring Company Information:

Company Name: \_\_\_\_\_

Company Contact: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Payment Information:

Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_ Other \_\_\_\_\_

Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Donation Amount: \_\_\_\_\_

*You will be charged a processing fee for credit card transactions*

### Select Sponsorship Level:

PLATINUM SPONSOR \$1,000

GOLD SPONSOR \$500

SILVER SPONSOR \$250

IN KIND SPONSOR (Complete Donation Form)

### SUBMIT COMPLETED FORM TO:

AADOM – Contra Costa Chapter

1150 Civic Dr. Suite 101

Walnut Creek, CA 94596

Email: [cccaadom@gmail.com](mailto:cccaadom@gmail.com)