



SPONSORSHIP OPPORTUNITIES

September 24, 2022

walkforcancerresearch.org

| | | |
|-----------------------------|--|---|
| Company Name | | |
| Contact Name | Daytime phone: | |
| Street address/City/ST/Zip: | | |
| Email: | Do you wish to be included in marketing and promotional materials? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

SPONSORSHIP

Sponsor benefits: T-shirts with company name, recognition on event materials, website and at the walk.

| | | | | | | | |
|--|--|---|---|---|----|-----|-----|
| Become a DIAMOND sponsor \$5,000 <input type="checkbox"/> Yes , I would like this sponsorship. | 6 t-shirts Fair market value \$240 T-shirts <input type="checkbox"/> Yes <input type="checkbox"/> No | S | M | L | XL | 2XL | 3XL |
| | | | | | | | |

| Become a PLATINUM sponsor \$2,500 | Become a GOLD sponsor \$1,000 | Become a SILVER sponsor \$500 | Become a BRONZE sponsor \$250 | Become a COPPER sponsor \$100 | | |
|--|--|---|---|--|-----|-----|
| <input type="checkbox"/> Yes , I would like this sponsorship. | <input type="checkbox"/> Yes , I would like this sponsorship. | <input type="checkbox"/> Yes , I would like this sponsorship. | <input type="checkbox"/> Yes , I would like this sponsorship. | <input type="checkbox"/> Yes , I would like this sponsorship. | | |
| 4 t-shirts Fair market value \$160 T-shirts <input type="checkbox"/> Yes <input type="checkbox"/> No | 3 t-shirts Fair market value \$120 T-shirts <input type="checkbox"/> Yes <input type="checkbox"/> No | 2 t-shirts Fair market value \$80 T-shirts <input type="checkbox"/> Yes <input type="checkbox"/> No | 1 t-shirt Fair market value \$40 T-shirt <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Shirt Size | Small | Medium | Large | XL | 2XL | 3XL |
| Quantity | | | | | | |

Would you like a booth? Please fill out and submit the Vendor Booth form

You will receive a receipt reflecting the sponsorship amount that exceeds the fair market value of goods / services provided. If you wish to decline the t-shirts, your receipt will reflect the full sponsorship amount. Village Walk for Cancer Research is a 501(c)3 non-profit. Tax ID 82-5377663.

Yes, I decline the t-shirts and my gift is for the full amount of the sponsorship. _____ (initial here)

GIFT IN-KIND: (A charitable tax receipt is not issued for services, advertising or items loaned for the event.)

Description of in-kind gift: _____ Value \$ _____

Signature required on reverse side

WAIVER AND PHOTO RELEASE AGREEMENT

All participants registering or otherwise participating in the annual Hot Springs Village Walk for Cancer Research (“Event”), hereby expressly consent to the following:

- I acknowledge and agree that participating in a race may be a potentially hazardous activity. I agree to participate at my own risk, and I agree to assume all risks associated with participating in this Event, including, but not limited to, falls, weather conditions, traffic, road conditions, and contact with other participants.
- In consideration of my acceptance into this Event, I for myself and anyone entitled to act on my behalf, hereby waive and release any and all claims, liabilities, damages (compensatory and punitive), legal fees, and causes of action that may arise as a result of my participating in the Event or any pre-Event/post-Event activities, that I may have or that I become aware of in the future, against persons, volunteers, and entities involved in planning, hosting or assisting with The Event, even if such liability may arise out of their negligence or carelessness, including but not limited to, the Event sponsors, Village Walk for Cancer Research organization and its officers.
- I agree that this waiver and release applies to myself and my successors and assigns, heirs, and any executors, administrators, personal representatives or beneficiaries or others who may make a claim on behalf of my estate.
- I grant full permission to use and reproduce my image or likeness by any audio and/or visual recording technique (including electronic/digital), for any legitimate purpose, including commercial marketing purposes, relating to the Event or to promote awareness and fundraising for cancer related initiatives.

I have read and agree with the statements above.

Signature Required: _____ **Date:** _____

Please enclose the completed form and make your check payable to Village WFCR Mailing Address:
100 Calella Road, Box 6, Hot Springs Village, AR 71909.

| | |
|--|----|
| Sponsorship Amount (check amount) | \$ |
| Additional cash donation | \$ |
| Subtract fair market value t-shirts received | |
| Receipt Amount | \$ |

| |
|---|
| Payment type: Check Cash Other |
|---|

For more information contact Clara Nicolosi (501-984-3778) or Nikki Choyce (501-570-6922)

Donate to **The Village Walk For Cancer Research** endowment fund. To learn more, go to:
www.ARCF.org/hotspringsvillage