

Sponsorship Form

Company: _____

Contact: _____

Address: _____

City: _____ State: _____

Zip: _____ Email: _____

I would like to reserve

- Pearl Sponsor (\$50)
- Ruby Sponsor (\$100)
- Emerald Sponsor (\$150)
- Diamond Sponsor (\$200)

For my Company/Organization/Family.

Please make checks payable to:
Eddie Travis 4 Memorial Fund

I _____, authorize the payment of \$ _____
to be charged to the credit card below.

Visa MC Amex Discover

Name on Card: _____

Credit Card Info: _____

Exp. Date: _____ Security Code: _____

Signature: _____ Date: _____

All sponsorship money collected will go directly into the Eddie Travis 4 Memorial Fund