



# SPONSORSHIP AGREEMENT FORM

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**VALLEY OF SAVANNAH**

**SCOTTISH RITE**

**PRESENTS**

**A WALK FOR  
RITE CARE**

\_\_\_ **Yes! I will be a sponsor for Walk for Rite Care**

\_\_\_ **Gold Sponsor \$1,000.00**

Recognition as gold sponsor for 2019 Walk for Rite Care on sponsorship flyer, registration for a two person walking team (if desired), inclusion of your business advertising material in drawstring backpacks given to the walkers (business material provided by you).

\_\_\_ **Silver Sponsor \$250.00**

Recognition as silver sponsor for the 2019 Walk for Rite Care on sponsorship flyer, inclusion of your business Advertising material in draw string backpacks given to the walkers (business material provided by you).

\*\*\*New this year if a sponsoring business would like to pass out Trick or Treat Candy along the Trail to show your support please contact Jessica at the Scottish Rite Office to make those arrangements.

\_\_\_ **I am unable to participate as a Sponsor however, I would like to support the Scottish Rite Valley of Savannah in the amount of \_\_\_\_\_.**

Signature \_\_\_\_\_

Sponsoring Representative

Date



Please email logos to savannahsrmason@gmail.com  
Checks made payable to the Valley of Savannah Scottish Rite