



# 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 six person walking team and Name on Event Banner.

\_\_\_ **Silver Sponsor** **\$500.00**  
Recognition as silver sponsor for the 2019 Walk for Rite Care on sponsorship flyer, registration for a four person walking team and Name on Event Banner.

\_\_\_ **Bronze Sponsor** **\$250.00**  
Recognition as bronze sponsor for the 2019 Walk for Rite Care on sponsorship flyer, registration for a two person walking team and Name on Event Banner.

\*\*\*If a sponsoring business would like to pass out Trick or Treat Candy along the Trail to show your support please check here, so that you may be contacted by Event Organizer Brandi Castano with details.



\_\_\_ **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 [walkforritecare@gmail.com](mailto:walkforritecare@gmail.com)  
Checks made payable to the Valley of Savannah Scottish Rite