



5th Annual Sherriff's Cup
June 27, 2021
Benefiting
COVID-19 Restaurant Worker Relief Fund

Sponsorship Donation Form

Name/Company: _____

Name: _____ Title: _____

Address: _____ City: _____

State/Zip: _____

Phone: _____ Email: _____

SPONSORSHIP

- ☐ \$15,000 Top Flight
- ☐ \$5,000 Eagle
- ☐ \$2,500 Birdie
- ☐ Other/Donation \$ _____

Form of Payment: ☐ Mail Check
☐ Pay at Registration

☐ By checking here and signing below, we agree to the above sponsor level and benefits and do not expect any other compensation outside of the benefits listed. We understand that, while Aspen Community Foundation will provide documentation recognizing this contribution, the valuation and all tax related matters are solely our responsibility.

Print Name: _____

Signature: _____ Date: _____

DONATION

Item Description: _____

Quantity: _____

Value: \$ _____

THANK YOU for your donation!

Aspen Community Foundation c/o Network for Good, TAX ID #68-0480736

Please submit completed form to: valerie@sheriffscup.com

Make checks payable to: **Sheriff Joe DiSalvo** and mail to
530 E. Main St. Suite 103. Aspen, CO 81611