



# Sponsorship Commitment Form

## COMPANY/ORGANIZATION INFORMATION:

Please print below exactly how you would like your company name to appear for recognition purposes:

\_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## PAYMENT INFORMATION:

**To pay by check:** Please make check payable to "Down Syndrome Association of Greater Toledo"

**To pay by credit card:** \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Discover \_\_\_ American Express

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CV2 \_\_\_\_\_

Name as it appears on credit card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## FUNDRAISING EVENT SPONSORSHIP LEVELS OF COMMITMENT:

Please clearly mark which fundraising event(s) you would like to provide funding for in the form of a sponsorship.  
Please return this form to DSAGT at [information@dsagt.org](mailto:information@dsagt.org).

## Toledo Buddy Walk - Sunday, October 18, 2020

\*Audience: 1,300 attendees made up of DSAGT supporters

- |   |   |
|---|---|
| <input type="checkbox"/> Presenting Sponsor   \$7,500 | <input type="checkbox"/> Buddy Sponsor   \$500                    |
| <input type="checkbox"/> Platinum Sponsor   \$5,000   | <input type="checkbox"/> Business Rate-Vendor Fair Table   \$250  |
| <input type="checkbox"/> Gold Sponsor   \$2,500       | <input type="checkbox"/> Nonprofit Rate-Vendor Fair Table   \$100 |
| <input type="checkbox"/> Silver Sponsor   \$1,500     | <input type="checkbox"/> In-kind Donation Sponsor                 |

Total Sponsorship Commitment:

\$ \_\_\_\_\_