



## Sponsorship Commitment Form

Walk Location: \_\_\_\_\_

YES! We are proud to support the Walk for 1 in 100 at the following level:

- |  |   |
|--|---|
| <input type="checkbox"/> Local Presenting (\$10,000) | <input type="checkbox"/> Silver (\$1,000) |
| <input type="checkbox"/> Platinum (\$5,000)          | <input type="checkbox"/> Bronze (\$500)   |
| <input type="checkbox"/> Gold (\$2,500)              | <input type="checkbox"/> Copper (\$250)   |

We would like to receive information about forming a team

We would like to donate a product or service (*please include quantity and estimated value*): \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name & Title: \_\_\_\_\_

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

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

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

E-Mail Address: \_\_\_\_\_

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

Please charge my:    Amex    Visa    Mastercard

Credit Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

*If paying by credit card, please ensure address above matches billing address for the card.*

OR make check payable to: **Adult Congenital Heart Association**

I need an invoice!

EIN: 04-3447959

Return this form to [events@achaheart.org](mailto:events@achaheart.org) or mail to:

Adult Congenital Heart Association

ATTN: Walk for 1 in 100

280 North Providence Road, Suite 6 Media, PA 19063

Logo files should be sent to [events@achaheart.org](mailto:events@achaheart.org) (.png or .eps preferred).

*Please note that sponsorship benefits are not guaranteed.*

***For more information, email [events@achaheart.org](mailto:events@achaheart.org).***

