



2010 SPONSOR COMMITMENT FORM WALK + RACE

WALK FOR LIFE	Platinum	(\$35,000)
	Gold	(\$20,000)
	Silver	(\$10,000)
	Bronze	(\$2,500)
	Community	(\$1,000)

5K RACE FOR LIFE	Starting Line	(\$5,000)
	Finish Line	(\$2,500)
	Mile Marker	(\$1,000)

Bill us for our gift of \$ _____ in _____ installments.

Our check is enclosed and made payable to Palmetto Health Foundation/Walk for Life.
Palmetto Health Foundation's Tax ID # is 57-0725699.

Please print the following information and keep a copy of this form and your sponsorship benefits for reference.

Company (how it will appear in print) _____

Address _____

City/State/Zip _____

Work Phone _____ Cell phone _____

Fax _____ E-mail _____

Contact Name _____ Title _____

Signature _____

Gift in honor in memory of: _____

Send acknowledgment to: _____

Address _____

City/State/Zip _____

Please return this form by Friday, July 30 to:

Andrew Cain | Palmetto Health Foundation | Department #274, Post Office Box 100199
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