



**Sponsor Information:**

Sponsor Name: \_\_\_\_\_

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

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

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

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

Phone: (\_\_\_\_) \_\_\_\_\_ Website: \_\_\_\_\_

**Sponsorship Information:**

Sponsorship Level: \_\_\_\_\_

Investment Level: \$ \_\_\_\_\_

Logos to be sent to: [events@charliesheartfoundation.com](mailto:events@charliesheartfoundation.com)

**Sponsorship Payment Information:**

Checks made payable to: **Charlie's Heart Foundation**

Online payments to be made at: **charliesheartfoundation.org**

- Click "Donate" button and add sponsorship level to memo line

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

*Please email completed form to [events@charliesheartfoundation.org](mailto:events@charliesheartfoundation.org).*