

# Sponsor Information We Need From You

Name of Organization/Business: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Amount Sponsored:** \_\_\_\_\_

**Area Sponsored:** \_\_\_\_\_

Invoice Requested \_\_\_\_\_ Yes \_\_\_\_\_ No