



CHAMPIONS FOR CHILDREN COMMITMENT FORM

SPONSOR (COMPANY OR INDIVIDUAL) NAME

CONTACT PERSON AND TITLE

PHONE

EMAIL

ADDRESS

CITY

STATE

ZIP CODE

Please indicate your level of commitment below. Thank you for your support!

Sponsorship Opportunities

___ \$10,000 Presenting

___ \$2,500 Partner

___ \$7,500 Platinum

___ \$1,500 Patron

___ \$5,000 Charity's Circle

Tribute

___ \$500 Personalized E-Tribute Message to honoree/s (Includes Logo)

Requirements: Please send a power point slide or a message with logo attached to hbaczkowski@coraservices.org.

Individual Tickets \$125 Each

___ Number of Tickets Requested

___ I am unable to attend. Please accept my donation of \$ _____

___ A check for \$ _____ made payable to CORA Services is enclosed.

Please return form and payment to: CORA Services Institutional Advancement,
8540 Verree Road, Philadelphia PA 19111

Payments can be made online at www.coraservices.org.

