



# Connections Weekend September 24 – 26, 2009 Sponsorship Form

## Donor Information (please print or type)

Name	
Billing address	
City	
State	
Zip Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

## Sponsorship Level

I (we) pledge to sponsor / advertise at the \_\_\_\_\_ level  
in the amount of \$\_\_\_\_\_ (See included table)

I (we) plan to make this contribution in the form of:

\_\_\_\_cash    \_\_\_\_check

(Make check/s payable to: Galion Community Foundation)

I (we) would like to provide our business logo for advertising.

\_\_\_\_Logo is enclosed    \_\_\_\_Logo will be e-mailed to [jenney.kathy@galion-city.k12.oh.us](mailto:jenney.kathy@galion-city.k12.oh.us)

## Acknowledgement Information

Please use the following name(s) in all acknowledgements:

--

\_\_\_\_ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Galion Community Foundation, Connections Weekend

Send to:

Galion Board of Education  
470 Portland Way North  
Galion, Ohio 44833

