



2nd Annual Purses with a Purpose Event Sponsorship Form

Company: _____

Contact Name: _____

Address: _____

City/State: _____ Zip: _____

Phone: () _____ Fax: () _____

E-mail: _____

Web site: _____

Yes, I will sponsor the event at the following level:

\$5,000 Diamond Sponsorship

\$500 Silver Sponsorship

\$2,500 Platinum Sponsorship

\$250 Bronze Sponsorship

\$1,000 Gold Sponsorship

Yes, I accept the sponsor benefits for this level as outlined on the sponsor benefits form.

Please indicate your preferred acknowledgement listing:

My total contribution is: \$ _____

Payment Method:

Enclosed is my check payable to CCCS of Greater Dallas for \$ _____.

Charge \$ _____ to my Visa Mastercard

Card Number: _____ Security Code: _____

Name as it appears on card: _____

Billing Address: _____

Signature: _____

Direct questions or comments to Sharon King, V.P. of Development: phone (214-540-6813) or email (Sking@cccsdallas.org)

Please mail the completed form with your donation to:

Sharon King
CCCS of Greater Dallas
8737 King George Drive
Dallas, Texas 75235