



De-Feet BREAST CANCER 5K RUN ♥ WALK

-T-Shirt/Website Sponsorship Opportunities

De-FEET Breast Cancer 5K Run/Walk: Saturday, April 4, 2020; Bar Anticipation, 703 16th Avenue, Lake Como, NJ

Please indicate your desired sponsorship opportunity below.

Your generous support for our foundation and event is greatly appreciated!

Mama Mare Breast Cancer Foundation is a 501(c)(3) non-profit charity. Tax ID: 27-3279045

Note: In order to be included on materials, the \$125 or \$175 sponsorships must be received by March 13, 2020

COMPANY INFORMATION: PLEASE FILL IN ALL FIELDS BELOW

Company: _____
Address: _____
City/State/Zip: _____
Phone: _____
Email: _____
Website URL: _____
Contact Person: _____

A) \$125.00 Sponsorship: Logo on the back of the *10th Annual De-FEET Breast Cancer 5K* T-shirts
T-shirts are being distributed to pre-registrants and registrants (while supplies last) on the day of event.

- ☐ Yes, I would like our company logo to appear on the T-shirts & the logo has been emailed to the Mama Mare Breast Cancer Foundation at mamamarefoundation5K@gmail.com
- ☐ \$125.00 has been provided for this sponsorship opportunity per the payment instructions/options on Page 2 of this form

B) \$175.00 Sponsorship: Logo on the back of the *10th Annual De-FEET Breast Cancer 5K* T-shirts + Logo on the Homepage of our 5K registration site (along with direct link to your website as provided above)
T-shirts are being distributed to pre-registrants and registrants (while supplies last) on the day of event.

- ☐ Yes, I would like our company logo to appear on the T-shirts as well as on runsignup.com/mamamare with a direct link to our company's website. The logo has been emailed to the Mama Mare Breast Cancer Foundation at mamamarefoundation5K@gmail.com
- ☐ \$175.00 has been enclosed for this sponsorship opportunity per the payment instructions/options on Page 2 of this form

Payment Instructions/Options

Complete this section for T-Shirt/Website Sponsorship Opportunities

Check:

- Checks may be made payable to: Mama Mare Breast Cancer Foundation
- Please return **completed** form with check to:
Mama Mare Breast Cancer Foundation, P.O. Box 1379, Easton, PA 18044

Credit Card (*Preferred method*):

- If using a credit card as form of payment, please fill out the following information and return completed form to: mamamarefoundation5k@gmail.com

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name (as it appears on card): _____

Credit Card #: _____

Expiration Date: ____ / ____

Security Code: _____

Billing Information for Credit Card:

Company Name: _____

Address: _____

Phone & Contact Name: _____

Email: _____

Please Read

Reminder: Company logos should be emailed directly to: mamamarefoundation5K@gmail.com

Proceeds from this fundraising event will benefit our ongoing breast cancer projects and programs at Robert Wood Johnson University Hospital and within the community by providing support services to breast cancer patients and their families.



Office Use Only for financial sponsorships

Payment Type: _____ Amount: _____ Completed By: _____