



THE SAVING SOPHIE EXPERIENCE: A JOURNEY TO FIND THE CURE - PLEDGE FORM

PRINT AND MAIL THIS COMPLETED FORM TO: SAVING SOPHIE, 15335 MORRISON ST. SUITE 101, SHERMAN OAKS, CA 91403.

EMAIL TO DARA@SAVINGSOPHIE.ORG OR REGISTER ONLINE AT WWW.JourneyToFindTheCure.org.

SPONSORSHIP OPPORTUNITIES

DEADLINE: MONDAY, SEPTEMBER 24TH, 2018

TITLE SPONSORSHIP \$50,000

GOLD SPONSORSHIP \$35,0000

PARTICIPATING SPONSORSHIP \$2,000

SILVER SPONSORSHIP \$25,000

EXPERIENCE SPONSOR \$5,000

RAFFLE ITEM ITEM: _____

\$ VALUE: _____

REGISTRATION INFORMATION

LAST NAME _____ FIRST NAME _____

PLEASE LIST HOW YOU WANT TO BE RECOGNIZED _____

COMPANY NAME _____ PHONE NUMBER (PERSONAL BUSINESS) _____

STREET ADDRESS (PERSONAL BUSINESS) _____

CITY, STATE, ZIP _____ EMAIL _____

TOTAL AMOUNT \$ _____ ENCLOSED IS MY CHECK MADE PAYABLE TO SAVING SOPHIE, ATTN/MEMO: THE SAVING SOPHIE EXPERIENCE

PLEASE BILL MY CREDIT CARD | BUSINESS PERSONAL | TOTAL AMOUNT TO BE CHARGED TO MY CREDIT CARD \$ _____

_____/_____/_____/_____
CARD NUMBER / EXP. DATE / CVV / ZIP ASSOCIATED WITH CARD

AUTHORIZED SIGNATURE / NAME AS IT APPEARS ON THE CARD

ANY PAYMENTS MADE BY CREDIT CARD WILL INCUR A 4% PROCESSING FEE. CONTRIBUTIONS TO SAVING SOPHIE ARE DEEMED CHARITABLE UNDER SECTION 501 (a) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3). U.S. FEDERAL TAX ID #81-4048873