



“Walk for Hope”

CHAVES COUNTY CANCER FUND

Gateway Christian School – Football Field

Saturday, October 12th, 2024 4:00 p.m. – 8:00 p.m.

SPONSORSHIP AGREEMENT

I, _____, of _____, do hereby agree to sponsor

____ Signature Sponsor \$7,500 (Logo needed)

____ 5-Star Sponsorship \$5,000 (Logo needed)

____ 4-Star Sponsorship \$2,500 (Logo Needed)

____ 3-Star Sponsorship \$1,000

____ 2-Star Sponsorship \$500

____ 1-Star Sponsorship \$250

____ Other Donation

In exchange, my business will receive benefits on the sponsorship form. **I understand that payment is required prior to printing any materials with sponsors' name. Please make checks payable to “Walk for Hope”.**

Authorized Signature _____ Date _____

Company name to be used in promotions _____ Is a logo needed? _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

For sponsorship questions, or to deliver your sponsorship check, contact the Walk for Hope committee at WalkforhopeRoswell@gmail.com