

# AMERICAN CANCER SOCIETY RELAY FOR LIFE®

## SPONSORSHIP COMMITMENT FORM

Business name: \_\_\_\_\_  
Street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact name: \_\_\_\_\_  
Telephone number (business): \_\_\_\_\_ Fax number: \_\_\_\_\_  
Email: \_\_\_\_\_ Web address: \_\_\_\_\_

### COMMITMENT LEVEL

- \$20,000 – Presenting     \$7,500 – Gold     \$2,500 – Bronze     \$0 – Optional Level  
 \$10,000 – Platinum     \$5,000 - Silver     \$1,000 – Signature     \$0 – Optional Level

### METHOD OF PAYMENT

- Enclosed is my sponsorship check in the amount of \$ \_\_\_\_\_  
 Charge my credit card (please print clearly)  
Card Type:     VISA     MasterCard     Discover     AMEX  
Cardholder's name: \_\_\_\_\_  
Billing address: \_\_\_\_\_  
Card number: \_\_\_\_\_ Exp. date: \_\_\_\_\_ Security code: \_\_\_\_\_  
 Please send remittance form to: \_\_\_\_\_

We are unable to be a designated Relay For Life sponsor this year but enclosed is our donation of \$ \_\_\_\_\_

Sponsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Please sign and retain a copy for your records.)*

Please return form to the address below:  
American Cancer Society  
2840 Electric Road, Roanoke, VA 24018  
Attention: Relay For Life of Roanoke/ Relay For Life of Salem

American Cancer Society, Inc.  
Federal Tax ID #13-1788491  
Organized under IRC 501(c)(3)

