

THANK YOU FOR YOUR SPONSORSHIP!

Event Proceeds Benefit Helping Harvest's Weekender Program

Personal Corporate

Contact Name _____ Title _____

Company/Organization _____

Street _____

City, State, Zip _____

Daytime Phone _____

Email _____

YES, I want to support HELPING HARVEST'S WEEKENDER PROGRAM by contributing at the following level (*please select one*)

- | | | | |
|--|---------|---|---------|
| <input type="checkbox"/> EXCLUSIVE Presenting Sponsor (16 tickets) | \$6,000 | <input type="checkbox"/> Community Partner Table Sponsors (8 tickets) | \$1,500 |
| <input type="checkbox"/> Community & Hope Sponsors (8 tickets) | \$4,000 | <input type="checkbox"/> Spirit of Community Partners (4 tickets) | \$450 |
| <input type="checkbox"/> EXCLUSIVE Video Sponsor (6 tickets) | \$3,500 | <input type="checkbox"/> Hope Tickets (2 tickets) | \$140 |
| <input checked="" type="checkbox"/> EXCLUSIVE SOLD Welcome Reception Sponsor | \$3,000 | <input type="checkbox"/> Helping Hand Ticket (1 ticket) | \$75 |
| <input type="checkbox"/> EXCLUSIVE Dessert Sponsor (6 tickets) | \$3,000 | | |

Please list my/our sponsorship as:

Payment Method

- Check is enclosed Please send me an invoice for Credit Card
(made payable to Helping Harvest) the above financial commitment

Billing Address _____

City, State, Zip _____

Card No: _____ Security Code: _____ Exp. Date: ____/____/____

Total amount of commitment \$ _____

Card Signature: _____

Please list your guest names here or by email to Jennifer Bauman at jbauman@helpingharvest.org.

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Event Contact: Jennifer Bauman | jbauman@helpingharvest.org | 610.926.5802 ext. 228

Please return form to: Helping Harvest, Attn: Development Department, 117 Morgan Drive, Reading, PA 19608