

# Sponsorship Form

Name (as you would like it to appear in the catalog): \_\_\_\_\_

Contact Name (if different): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Ste #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

## **Sponsorship Options:** (Circle One Option)

### **VIP Sponsor (\$500)**

Becoming a VIP Sponsor guarantees you reserved VIP seating for 8 guests at the Live Auction Dinner, a full page business ad & special recognition in the auction catalog, as well as a bonus meal options.

### **Patron Sponsor (\$250)**

Becoming a Patron Sponsor grants you 4 tickets to the auction, a half page business ad & special recognition in the auction catalog.

### **Friend (\$100)**

Becoming a Friend Sponsor gives you 2 tickets to the auction & special recognition in the auction catalog.

**Payment Options:** Please remit payment with this form. Acceptable forms of payment are cash, check, or credit card. If paying by credit card, you may go to [auction.riveroflifefellowship.org](http://auction.riveroflifefellowship.org) and follow the link to Sponsorship.

**Submit Form:** You may submit this form in person or by mail to River of Life Fellowship Attn: Melissa Burr 10626 SE 216th ST Kent, WA 98031. You may also submit this form via email to [auction@riveroflifefellowship.org](mailto:auction@riveroflifefellowship.org) or fax it to 253-813-0220. A member of our auction team will contact you to confirm submission and to obtain your guests names and meal selections.

**Submit Artwork:** Email artwork to [auction@riveroflifefellowship.org](mailto:auction@riveroflifefellowship.org). Acceptable artwork formats are: PSD, JPG, GIF, EPS, and TIFF at 300dpi.

Thank you for Impacting Young Lives!

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Date

Questions? Contact **Melissa Burr**, Auction Coordinator at 253.859.5823 x9120 or email [auction@riveroflifefellowship.org](mailto:auction@riveroflifefellowship.org)

For Office Use Only:

Payment by:    Cash                      Check # \_\_\_\_\_                      Credit Card (last four digits of card #) \_\_\_\_\_

Paid:    In Person                      Info Center                      Online                      By Phone

Rcv'd Payment by \_\_\_\_\_ on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ for \$ \_\_\_\_\_