

# Sponsorship Form

## Kiwanis Club of Sweet Home Presents:

# Sweet Home, Sweet Ride Charity Event for Kids

Proceeds to benefit Doernbecher Children's Hospital, SHPD Kid Programs, "Shop-with-a-Cop", Sunshine Industries, and ABC House.

### Sponsor Information (please print)

Name of Contact(s)	
Company Name	
Street Address	
City, State, Zip Code	
E-mail Address	
Telephone (business)	
Telephone (cell / other)	
Fax	

**Event Sponsor @ \$ \_\_\_\_\_**

**Trophy Sponsor @ \$50 Each \$ \_\_\_\_\_**

I (we) plan to make this contribution in the form of: **cash** \_\_\_\_\_ **check** \_\_\_\_\_ **Gift Certificate** \_\_\_\_\_

**Raffle Prize Sponsor \$ \_\_\_\_\_**

**Raffle Prize valued at \$ \_\_\_\_\_**

I (we) plan to make this contribution in the form of: **cash** \_\_\_\_\_ **check** \_\_\_\_\_ **Gift Certificate** \_\_\_\_\_

**Event Vendor:**

I (we) agree to contribute \$25 to set up a vendor booth at the Sweet Home Sweet Ride Charity Event for Kids. I (we) plan to make this contribution in the form of: \_\_\_\_\_ **cash** \_\_\_\_\_ **check**

**Poker Walk Sponsor, must be an onsite vendor - \$10**

I (we) agree to sponsor the Sweet Home, Sweet Ride Poker Walk for a total of **\$10**. I (we) plan to make this contribution in the form of: \_\_\_\_\_ **cash** \_\_\_\_\_ **check**

**Acknowledgement Information**

Please use the following name(s) in all acknowledgements:

\_\_\_\_\_ I (we) wish to have this gift remain anonymous.

Signature(s)
Date

**Note: Contributions, donations and gifts to SWEET HOME SWEET RIDE are deductible charitable contributions for federal income tax purposes.**

**Please make checks or other gifts payable to:** Sweet Home Sweet Ride, and mail payment to P.O. Box 654, Sweet Home, OR 97386

**Contact: Larry Angland (541)818-0222 or Kimi Nash (541)401-9844**  
**E-mail: [sweethomesweetride.director@gmail.com](mailto:sweethomesweetride.director@gmail.com) – Website: [www.sweethomesweetride.com](http://www.sweethomesweetride.com)**