

DSAW-Green Bay Connection

# Down Syndrome Awareness Walk 2021



**dsaw**  
Down Syndrome  
Association of Wisconsin, Inc.  
awareness · acceptance · assistance  
**GREEN BAY**

## Sponsorship/Marketing Agreement:

Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Organization *(Exactly as you would like it to appear in print)* \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

*My signature indicates authorization to make this commitment on behalf of my company*

Marketing Contact Name \_\_\_\_\_ Email \_\_\_\_\_

## Sponsorship Level:

Platinum Sponsor: \$7,500

Gold Sponsor: \$5,000

Diamond Sponsor: \$2,500

Silver Sponsor: \$1,000

Bronze Sponsor: \$500

Fact Sign: \$100

Underwriting of \_\_\_\_\_

In-Kind of \_\_\_\_\_

Please accept my donation in the amount of \$ \_\_\_\_\_

## Other Donations:

We also need goods and services for our raffles! Consider donating:

Good/Service: \_\_\_\_\_ Value: \$ \_\_\_\_\_

## Method of Payment:

Check enclosed *(Please make checks payable to DSAW)*

Visa  Mastercard

Card # \_\_\_\_\_ 3 digit security code \_\_\_\_\_

Exp Date \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**DSAW-Green Bay Connection**

**PO Box 668, Green Bay, WI 54305**

**Email: [info@dsaw-gbc.org](mailto:info@dsaw-gbc.org) Phone: (414) 327-3729 Fax: (414) 327-1329**

**Marketing Purpose:** The purpose of the event is to benefit the Down Syndrome Association of Wisconsin - Green Bay Connection programs and services and to advance its non-profit mission.

*DSAW must receive this agreement form before August 31, 2021 in order for your company to receive sponsorship recognition. You may email or mail the form.*