



**Make-A-Wish Foundation® of Central & Western North Carolina's  
2nd Annual Walk For Wishes®**

**SPONSORSHIP LEVELS**

**Star Sponsor - \$5,000**

- Company logo & designation on walk web site
- Company logo on event banner
- Opportunity for vendor display day of event (10x10 Booth Space)
- Logo inclusion on walk posters & other collateral
- Invited on stage & announcement as walk sponsor
- Corporate banner hung in prime location at walk
- Company mentioned in media advertising
- Opportunity to speak at the event
- One in-house education lunch-n-learn

**Hope Sponsor - \$2,500**

- Company logo & designation on walk web site
- Company logo on event banner
- Opportunity for vendor display day of event (10x10 Booth Space)
- Logo inclusion on walk posters
- Invited on stage & announcement as walk sponsor
- Corporate banner hung in prime location at walk
- One in-house education lunch-n-learn

**Strength Sponsor - \$1,000**

- Company logo & designation on walk web site
- Company logo on event banner
- Opportunity for vendor display day of event (10x10 Booth Space)
- Announcement as walk sponsor
- Name listed on walk posters

**Joy Sponsor - \$500**

- Company listed on event web site
- Company listed on event banner

**Vendor Opportunity**

- 10x10 Booth Space

**In-Kind Sponsor**

- Company listed on event web site
- Company listed on event banner

I cannot contribute as a sponsor, but I would like to make a donation in the amount of \$\_\_\_\_\_

**If you are including payment please indicate:**

**Check**     **Money Order**     **Credit Card:**     Visa     MasterCard     Amex  
(Make check payable to the Make-A-Wish Foundation)

**Credit Card #** \_\_\_\_\_ **Expiration Date:** \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Contact Information:**

Company Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City: \_\_\_\_\_

Email Address: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**Make-A-Wish Foundation®  
of Central and Western North Carolina**

**LETTER OF INTENT**

We are pleased to support Make-A-Wish Foundation of Central and Western North Carolina (MAWCWNC) with the following commitment:

**SPONSORSHIP COMMITMENT:**

We agree to sponsor the Charlotte Walk For Wishes® to benefit MAWCWNC at the \_\_\_\_\_ level valued at \$\_\_\_\_\_. Our sponsorship contribution will be paid in full no later than the event date, November 12, 2011.

**SPONSORSHIP PAYMENT SCHEDULE:**

Our commitment will be made the following way:

- With the enclosed sum of \$\_\_\_\_\_
- Send me an invoice for sum of \$\_\_\_\_\_
- With a payment schedule:  
(Circle one)    Monthly            Weekly            Beginning \_\_\_\_\_.

**Name(s):** \_\_\_\_\_

*(Please print, as you would like your name to appear on receipts, acknowledgements and donor recognition materials.)*

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please make checks payable to:

**Make-A-Wish Foundation of Central and Western North Carolina  
6000 Meadowbrook Mall Ct. Ste 28  
Clemmons, NC 27012**

**(336) 778-2522 p; (336) 778-2524 f**

**[www.ncwish.org](http://www.ncwish.org)**