

SPONSOR RESPONSE FORM

DMACC 5K Walk/Run Saturday, September 28, 2024

Sponsor Information

Company				
Contact Name				
Address		City	_ State	_Zip
Phone	_Email			

I want to sponsor at the following level:

🖵 Presenting - \$5,000	🖵 Tent - \$3,500	🖵 Breakfast - \$2,500
🖵 Fun Zone - \$2,500	🖵 Medal - \$2,500	🖵 Timing - \$1,500
🖵 Entertainment - \$1,000	🖵 Race Bib - \$1,000	Mile Marker - \$1,000
🖵 Water Stop - \$1,000	🖵 Race Day - \$500	

Payment Options

Total Sponsorship \$_____

- □ Enclosed is my check made payable to DMACC Foundation.
- □ Please invoice me. Month to be invoiced_____
- □ I will go online to <u>foundation.dmacc.edu</u> to make my payment.
- □ I'm unable to attend this year, but want to support DMACC students. Enclosed is my tax-deductible donation for:

🗅 \$1,000 🗅 \$500 🗅 \$250 🗅 \$100 🗅 Other \$_____

Thank you for your support!

DMACC Foundation | 2006 S Ankeny Blvd Bldg 22 | Ankeny, IA 50023 <u>foundation@dmacc.edu</u> | 515-964-6229