



SPONSOR COMMITMENT FORM

Yes, I want to support the Center by sponsoring Bridge Builders 2010 on Tuesday, October 12th.

Select your level of support:

Please Complete Sponsorship Information:

SOOD \$35,000 Presenting Sponsor

- \$25,000 Builders Sponsor
- \$10,000 Leadership Sponsor
- \$ 5,000 Pathways Sponsor
- \$ 3,000 Bright Future Sponsor
- \$ 1,000 Connectors Sponsor

_____ Contact Name

_____ Company Name

_____ Address

_____ City State Zip

_____ Email

_____ Phone Fax

_____ Name As It Should Appear In Printed Materials

_____ Signature Date

Select Your Payment Method:

- Send Me an Invoice
- My Check to "The Center for Healthy Families" Enclosed
- Charge My Credit Card

_____ Card Type

_____ Name on Card

_____ Card Number

_____ Expiration Date

_____ Security Code

_____ Signature

I Want to Make a Long-term Investment:

Please count on me to make a repeat gift for :

- One Year: \$ _____
- Two Years: \$ _____ per year
- Three Years: \$ _____ per year

Please Return Your Commitment Form To:

The Center for Healthy Families, attn: BB2010, 500 South Front Street, Suite 1200, Columbus, OH 43215

For Questions: Call A.J. Casey at (614) 229-4565; email: developopt@thecenterforhealthyfamilies.org

