



## Sponsorship Commitment Form & Application

### Samantha's Purpose - Run, Walk & Stroll 2K for Cerebral Palsy

Please complete sponsorship contribution(s) below

Sponsorship Type	Category Description	Amount
Cash		
*Product		
*In-Kind Donations/Services		

**Total Consideration:**      \$ \_\_\_\_\_

\*\* Please indicate quantities and value. In-kind donations may include, but not limited to: *gift cards, discounted memberships, promotional items, etc.*

### EVENT PARTICIPATION

Will your company have a representative(s) attend the event?     Yes     No

Will you have a tent/booth at the event?     Yes     No   

\*If yes, please provide details of any activities, promotional giveaways, etc., you will be conducting at your tent.

---



---

\*\*\*\*\*

To confirm your participation complete this form and email it to [events@palmettobay-fl.gov](mailto:events@palmettobay-fl.gov)

**Name of Company**

---

**Contact Name**

---

**Contact Phone Number**

---

**Contact Fax Number**

---

**Contact Email Address** \_\_\_\_\_

\*\* If an invoice is required for payment, please send a request to: [events@palmettobay-fl.gov](mailto:events@palmettobay-fl.gov)

**Deadline:** **January 26<sup>th</sup>** in order to have your logo included on all printed marketing material.