

SPONSORSHIP COMMITMENT FORM

6th Annual Saint Marianne Cope Walk Ala Moana Beach Park Saturday, January 26, 2019

Registration begins at 7:00 a.m. ~ Walk begins at 7:30 a.m.

Sponsorship Information Due By: Friday, January 4, 2019
Please print your company name exactly as you wish it to appear in publicity materials:

•	onsor Information					
	mpany Name:					
	ntact Name/Title:					
Signature:						
City	y, State, Zip:					
Phone:				Fax:		
E-N	Mail Address:					
Team Contact			Dla	Phone:		
rea	am Contact:		Pno	one:		
Sp	onsor Level					
Coi	Count our company in for the Saint Marianne Cope Walk! Please sign us up at the following sponsorship level:					
	Saints	\$20,000		St. Clare of Assisi	\$2,500	
	St. Marianne Cope	\$10,000		St. Anthony of Padua	\$1,000	
	St. Francis of Assisi	\$5,000				
			-	n tent on the day of the ever		
		• •		y coordinate with Accel Part nt the deadline is <mark>Friday, De</mark>		
ouc	5-464-2236. IJ YOU WOUIU IIK	e to reserve a space of	r rent a te	nt the deduline is <mark>Friday, De</mark>	cember 21, 2016.	
Fo	rm of Payment					
	Please invoice us.					
	My check is enclosed. Make checks payable to: St. Francis Healthcare Foundation of Hawaii					
Do	onation					
	We cannot commit this year, but will make a tax-deductible donation of \$					
	·	We would like to make an in-kind contribution of \$				

Mahalo nui loa!