**Sponsorship Commitment Form**

Company: _______________________________________________   Contact: __________________________________

Address: ________________________________________  City: ________________________ St: ____  Zip: ______

Phone: ___________________________________________ Email: _____________________________________________

Signature: __________________________________________________________________  Date: ______________

- Annual Signature Sponsorship  $3,000

Ride United 6, 25, 50, 100 mile bicycle ride   ☐ $5,000     ☐ $3,000     ☐ $1,500

Muskegon County

Day of Caring  ☐ $5,000     ☐ $3,000     ☐ $1,500

Newaygo County

Mistletoe & Music  ☐ $500     ☐ $300     Day of Caring  ☐ $500

Oceana County

Golf United  ☐ $300     ☐ $200     ☐ $100     Day of Caring  ☐ $500

- In Kind Sponsorship  $__________  (value)
  
  For event/opportunity: __________________________________________________________
  
  Description of in kind donation: ________________________________________________
  
  Note: In kind donors will receive sponsorship benefits equal to the value of the in kind donation.

- Check Enclosed    ☐ Please Send Invoice

- We will pay online: unitedwaylakeshore.org/donate
  
  Note: if paying online, please indicate what you are sponsoring in the Special Notes section.

Return form to: Stephanie Ladegast
Mail: PO Box 207, Muskegon, MI 49443   •   Email: stephanie@unitedwaylakeshore.org   •   Fax: (231) 722-3137

Additional opportunities may be available. For any special requests or concerns, please contact Stephanie at 231-332-4000

Please email a high resolution logo to: chris@unitedwaylakeshore.org