



2010 Sponsor Form

St. Louis, MO • October 2, 2010
 Creve Coeur Park
 Tremayne Shelter at Sailboat Cove

	Level 1 Sponsor • \$10,000	Level 2 Sponsor • \$5,000	Level 3 Sponsor • \$3,000	Level 4 Sponsor • \$1,000	Level 5 Sponsor • \$500	Level 6 Sponsor • \$250
Recognition in all Walk press releases	☎	☎				
Complimentary walk registrants	12	10	6	4		
Over 2,000 Walk T-Shirts	Logo*	Name*				
Over 20,000 registration forms sent nationally	Logo*	Name*	Name*			
Walk Website Representation	Logo	Logo	Name	Name		
Recognition in Memorial Program	Full Page ¹	Full Page ¹	Full Page ¹	Full Page ¹	Half Page ¹	Qtr. Page ¹
Recognition in Walk Sponsor Packet	Logo	Logo	Name	Name	Name	Name
Opportunity to have literature/promotional items at the Walk	☎	☎	☎	☎	☎	☎
Banner displayed by tent (provided by the company/organization)	☎	☎	☎			
Volunteer opportunities for company employees	☎	☎	☎	☎	☎	☎

Other Sponsorship Opportunities:

Caring Sponsor

\$100 Sponsorship Commitment for business card message space

Product Sponsor

A contribution of products may be considered for sponsorship. Product donations will be valued at one half of the retail value to determine levels of sponsorship. No merchandise sales will be allowed at the Walk unless 100% of the proceeds are donated to Share Pregnancy & Infant Loss Support, Inc.

* Please call for deadlines
¹logos, pictures, and text included

Additional Sponsor Forms and SponsorPackets can be downloaded at www.nationalshareoffice.com.

The deadline is August 27, 2010 for sponsor recognition at the Walk.

Sponsors are responsible for sending logos and/or special instructions with their donation by mail or to sgrant@nationalshare.org, and must be postmarked by August 27, 2010. This will ensure appropriate representation of the organization in our sponsor advertising.

- Level 1: \$10,000
- Level 2: \$5,000
- Level 3: \$3,000
- Level 4: \$1,000
- Level 5: \$500
- Level 6: \$250
- Caring Sponsor: \$100
- Product Sponsor

Payment:

- Check payable to National Share
- Mastercard/VISA (circle one)
 Account #: _____
 Exp. Date: _____ / _____
 Signature: _____

Return Completed Sponsor Form and Payment to:

National Share Office
 Attention: Walk
 402 Jackson
 St. Charles, MO 63301

Thank you for making a difference in the life of a bereaved family!

 Business/Team/Family Name

 Contact Name

 Address

 Phone/Ext.

 Email

- I have attached my business card, personal message, and/or special instructions for ad space
- I have emailed my business logo, personal message, and /or special instructions for ad space to sgrant@nationalshare.org

Complimentary Participants for Level 1 (12), Level 2 (10), Level 3 (6), & Level 4 (4):

One t-shirt is included per complimentary participant; write in the amount of shirts in front of the sizes.

Adult ___ S ___ M ___ L ___ XL ___ 2XL ___ 3XL
 Youth ___ S(6-8) ___ M(10-12) ___ L(14-16)