

Sail for the Cure® Corporate Sponsor Form

Please see the form below for your sponsorship level of commitment and benefits. The sooner you sign up, the sooner your sponsorship recognition begins! However, you will need to sign up no later than August 31, 2009 to assure your place in our brochure, media materials, and to receive the most your benefits have to offer.



Thank you for your generous support!

Sponsorship Level	You'll receive:	Sponsorship
Platinum Cup	Boat banner Large logo on T-shirt Large logo on webpage Six event entries – on the water game, auction and swag give-away (\$210 value) Reserved table for six at event Name listed on all press releases, collateral and presentations as "Title Sponsor" Name listed as title sponsor on monthly (or more often) email blasts to event participants Name and large logo listed as title sponsor on thank you advertisement Space for business display at event	\$4,000 +
Gold Cup	Boat banner Medium logo on T-shirt Medium logo on webpage Four event entries – on the water game, auction and swag give-away (\$140 value) Reserved table for four at event Name listed on all press releases, collateral and presentations Name listed on monthly (or more often) email blasts to event participants Name and medium logo on thank you advertisement	\$2,000
Silver Cup	Boat banner Small logo on T-shirt Small logo on the webpage Two event entries – on the water game, auction and swag give-away (\$70 value) Name listed on all press releases, collateral and presentations Name listed on thank you advertisement	\$1,000
Bronze Cup	Boat banner Name (words only) listed on T-shirt Name listed on thank you advertisement	\$500

Sign me up!

1. Choose your level of sponsorship: (check one box)

Platinum: \$ _____
 Gold: \$ _____
 Silver: \$ _____
 Bronze: \$ _____
Total: \$ _____

2. Fill out the contact information and sign on the signature line:

Name: _____ Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Signature: _____ Date: _____

3. Payment information:

Cash Check (make payable to OWSA), Check #: _____
 Visa MasterCard

Acct. #: _____

Exp. Date: _____ Last 3 digits on back: _____

4. Mail to: Oregon Women's Sailing Association
Sail for the Cure
PO Box 17615
Portland, OR 97217

For more information, contact Nicole Sirois, 360-834-4317
or SFCsponsorship@owsa.net.

For SFC Committee Use Only	
Contacted by:	Pick up/Delivery Options:
Comments:	<input type="checkbox"/> Pick up <input type="checkbox"/> Will be delivered
	Pick up/Delivery Date: _____ Pick up/Delivery Time: _____
	Picked up/Received by: _____ If mailed, date received: _____