



Holiday Gift Card& Handbag Bingo SPONSORSHIP REPLY FORM

Contact Name:		
Company Name:		
Address:		
Phone (Work):	Cell:	
E-mail Address:		
Please Check the Appropriate Level of Sponsorship:		
Presenting Sponsor \$1000		
Special Game Sponsor \$500		
□ Raffle Sponsor \$250		
□ Water or Candy Sponsor \$150		
□ Game Sponsor \$100		
□ Business Card Advertisement \$50		
Donation \$		

METHOD OF PAYMENT

Check: My check in the amount of \$ accompanies this form	
Credit Card: (Please check one) 🗆 Visa 🔅 Mastercard 🔅 American Express	
Card Number:	Expiration Date:
Name as it appears on card:	
Signature:	
If sponsoring a game or games, please indicate whether the game(s) are in honor or memory of a loved one, and please give the loved one's name on the following below:	

Email completed form to <u>Cindy@CancerSupportPhiladelphia.org</u> or mail to: Cancer Support Community Greater Philadelphia 200 Kirk Road Warminster, PA 18974

Your donation will help support those living with cancer and their families. All sponsor commitments must be received by November 20, 2024. Thank You!

Fax: 215-441-3295 | Phone: 215-441-3290 |Tax ID 23-2657403 www.cancersupportphiladelphia.org