



**LUNgevity Kankakee
Lung Cancer Walk
May 8, 2010**

Sponsorship Commitment Form

Sponsor Name _____

Contact Name _____

Street Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Fax** _____ **Email** _____

My Event Contact is _____

Sponsorship Level

_____ Title Sponsor \$500

_____ Silver Sponsor \$200

_____ Platinum Sponsor \$400

_____ Bronze Sponsor \$100

_____ Gold Sponsor \$300

To complete your sponsorship package, your company logo may be required. Please provide the contact information for the individual we should contact for these materials.

Marketing Contact Name _____

Email Address _____

Please make check payable to LUNgevity Foundation.

Attach sponsorship check to this form and send to:

435 North LaSalle Street, Suite 310, Chicago, Illinois 60654

p: (312) 464-0716 f: (312) 464-0737

www.lungevity.org

LUNgevity Foundation is a 501(c)(3) nonprofit organization (FEIN 36-4433410). This sponsorship is tax-deductible to the full extent provided by law. Please copy this form for your records. You will receive an acknowledgment letter for your donation.

For more information about the LUNgevity Kankakee Lung Cancer Walk please contact:

Tammy Johnson

312-464-0716/KANKAKEE@LUNGEVITY.ORG

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