

Sponsor Confirmation Form

Name (as it should appear in print): _____

Contact Person: _____

Organization: _____

Address: _____

City, State, Zip: _____

Daytime Phone Number: _____ Email: _____

Yes, I/we would like to be a Sponsor!

- | | |
|--|--|
| <input type="checkbox"/> \$50,000 Platinum Sponsor | <input type="checkbox"/> \$30,000 Order of the Golden Claw Sponsor |
| <input type="checkbox"/> \$22,500 Ruby Claw Sponsor | <input type="checkbox"/> \$15,000 Valet Parking Sponsor |
| | <input type="checkbox"/> \$15,000 Sapphire Claw Sponsor (Pick One) |
| | <input type="checkbox"/> East Room Sponsor |
| | <input type="checkbox"/> Gift Sponsor |
| <input type="checkbox"/> \$10,000 Emerald Claw Sponsor | <input type="checkbox"/> \$7,500 Colossal Claw Sponsor |
| <input type="checkbox"/> \$5,500 Jumbo Claw Sponsor | <input type="checkbox"/> \$3,500 Large Claw Sponsor |

I/We are unable to attend, but would like to support Informed Families:

- \$ _____ for programs helping kids grow up safe, healthy and drug-free in honor of the 33rd Annual Dinner at Joe's

Payment Method:

- Online Payment: [Click here](#) and you'll be directed to our secure server where you can pay directly
- Credit Card: Please fax OR mail this form to us and we will process it via our secure server. Do not email it.
- Check Enclosed: Please make check payable to **Informed Families**

Circle One: AMEX VISA MasterCard Discover Card

Name on Card: _____ Card Number: _____

Security Number: _____ Expiration Date: _____ Signature _____

Billing Address: _____ City, State, Zip _____

Thank you for your support! Please mail or fax this form by Friday, March 30 to:

Informed Families

Attn: Milly Davila, Development Office

2490 Coral Way, 3rd Floor, Miami, FL 33145

Phone: 305-856-4886 • Fax: 305-856-4815 • Email: edavila@informedfamilies.org