

**2020 Sponsorship Form
Share A Vision Virtual Run
Summer 2020**

Name of individual or company: _____

Phone number: _____

Address: _____

Title Sponsor (1 available)

\$1,000 Title Sponsor of Share A Vision Virtual Run

Shirt Sponsors (3 available)

\$750 Back of shirt

\$500 Right Sleeve

\$500 Left Sleeve

Event Sponsor

\$100 recognition of Company name on website

Other: _____

Payment Information: Please send complete form and payment to:

Share A Vision Co Inc
c/o 9182 Sugarbush Drive
Mentor, OH 44060

*****Please make checks payable to Share A Vision**

Credit Card Information: Card Number _____

Expiration Date _____ 3 Digit Code _____

Zip Code of Card _____

Email address if receipt is requested

Thank you for your generosity!