## **Sponsorship Donation Contract**





COMPANY/INDIVIDUAL NAME		DATE	
CONTACT NAME		 TITLE	
ADDRESS		CITY/ST/ZIP	
EMAIL			
PLEASE SEE REVERSE FOR SPONSORSHIP LEVEL DETAIL:			
☐ Sustaining Community Partner (Cash \$20,000 + with five year contract)		<b>Bronze</b> (\$2,000 - \$4,999)	
☐ Community Partner (Cash \$15,000 +)		<b>Benefactor</b> (\$750 - \$1,999)	
☐ <b>Diamond</b> (In Kind \$15,000 +)		<b>Patron</b> (\$100 - \$749)	
□ <b>Gold</b> (\$10,000 - \$14,999)		Friend (Up to \$99)	
□ Silver (\$5,000 - \$9,999)	Silver (\$5,000 - \$9,999)  Sponsor and donor recognition in JLEP print materials are subject to a print deadline (to include logo) of September 13, 2020.		
PERSON TO RECEIVE ALL BENEFIT INFORMATION (if di	ifferent from	information above):	
PERSON TO RECEIVE ALL BENEFIT INFORMATION (if di Name Address			
		City/State/Zip	
Name Address	should appea	City/State/Zip	
Name Address  RECOGNITION: Please type or print your name EXACTLY as it s	should appea	City/State/Zipar in JLEP publications, signage and other printed materials.	
Name Address	should appea	City/State/Zipar in JLEP publications, signage and other printed materials.	
Name Address  RECOGNITION: Please type or print your name EXACTLY as it :  I (We) decline all benefits.  PAYMENT INFORMATION:	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.	
NameAddress  RECOGNITION: Please type or print your name EXACTLY as it :  I (We) decline all benefits.  PAYMENT INFORMATION:  DONATION AMOUNT: CASH \$	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.	
NameAddress	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.  IN-KIND: \$	
NameAddress	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.  IN-KIND: \$	
NameAddress  RECOGNITION: Please type or print your name EXACTLY as it s  I (We) decline all benefits.  PAYMENT INFORMATION:  DONATION AMOUNT: CASH \$  Check made payable to: Junior League of El Paso, Inc.  Bill me  Please charge credit card: □Visa	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.  IN-KIND: \$	
NameAddress	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.  IN-KIND: \$  ard  Security Code:  Date:	
NameAddress	should appea	City/State/Zip ar in JLEP publications, signage and other printed materials.  e) prefer to be listed as an Anonymous donor.  IN-KIND: \$  ard  Security Code:  Date: Date: Date: Date:	

The Junior League of El Paso, Inc. is a charitable non-profit organization under Section 501(c) (3) of the Internal Revenue Code. Your contribution is tax deductible to the extent provided by law.