

LAGBAC

LESBIAN AND GAY BAR ASSOCIATION OF CHICAGO

The Lesbian and Gay Bar Association of Chicago Champagne Brunch - Sponsor Form

Corporate Sponsor: _____

Contact Name: _____

Address: _____

Telephone: _____

Email: _____

Sponsorship Level: ___ **Platinum** ___ **Diamond** ___ **Gold**

Corresponding contribution: \$_____ Check payable to: **LAGBAC FOUNDATION**

___ Check Attached ___ Check will arrive by _____

The Corporate Sponsor will receive all the benefits detailed for the selected sponsorship level on the attached sponsorship level information sheet. The sponsorship contribution is tax-deductible, as provided by law, less the Fair Market Value of _____ per seat at the Gala.

By executing this commitment form, you indicate that you are authorized to act on behalf of the Corporate Sponsor and that you understand that in reliance on this commitment form LAGBAC will provide the Corporate Sponsor all the recognition benefits associated with the requested sponsorship level. **Full payment must be received by March 22, 2013.**

Please send your logo to wlopez@lagbac.org.

The terms of this contract has been agreed upon by:

FOR LAGBAC

FOR CORPORATE SPONSOR:

Signature

Authorized Signature

John Litchfield
President

Authorized Name & Title

Date
to

Date