



SPONSORSHIP REGISTRATION

PLEASE COMPLETE THIS FORM & RETURN BY EMAIL TO

Catherine Chown at cchown@southlake.ca to secure your sponsorship today

\$20,000 Sponsor

\$3,000 Sponsor

\$10,000 Sponsor

\$1,000 Athlete's Village Booth

\$5,000 Sponsor

Contact Name _____

Contact Title _____

Sponsor Name (as it should appear in print)

Address _____ City _____

Province _____ Postal Code _____ Telephone _____

Email _____

I would like to donate to the event:

Amount: \$ _____

Visa MasterCard American Express

Cardholder Name: _____

Card #: _____ Exp: _____ CSV: _____

Cheque (Payable to Southlake Regional Health Centre Foundation)