



AIDS WALK Kansas City 2010

SPONSORSHIP RESPONSE FORM

Levels of Support

Underwriting Presenter	\$25,000 +
Platinum	\$10,000
Gold	\$5,000
Silver	\$2,500
Bronze	\$1,000
Partner	\$500
Booth Sponsor	\$250

____ **Yes**, we want to serve as a corporate sponsor of **AIDS WALK** at the _____ level. Please find enclosed our company check in the amount of \$ _____.

Please make checks payable to AIDS WALK Kansas City.

Name of Company _____

Contact Name _____

Title _____

Address _____

Phone: _____

Fax: _____

Email: _____

All gifts to AIDS WALK Kansas City are tax deductible. THANK YOU!

If you have any questions, please call Michael at: 816-931-0959 or 913-269-7960

Please fax to: 816-931-5676

Or mail to: AIDS WALK Kansas City
P.O. Box 32192
Kansas City, MO 64171