

THE 16TH ANNUAL STEVE CHASE HUMANITARIAN AWARDS  
SPONSORSHIP AGREEMENT FORM

▼ PLEASE CHECK

Pinnacle Sponsor \$100,000 (\$95,000 tax deductible amount)

Principal Sponsor \$50,000 (\$47,500 tax deductible amount)

Major Sponsor \$25,000 (\$22,500 tax deductible amount)

Supporting Sponsor \$10,000 (\$8750 tax deductible amount)

Benefactor Sponsor \$5,000 (\$4500 tax deductible amount)

Patron Sponsor \$1000 (\$875 tax deductible amount)

\_\_\_\_\_ (YOUR COMPANY / INDIVIDUAL NAME) HEREBY AGREES TO BE A SPONSOR OF THE STEVE CHASE HUMANITARIAN AWARDS GALA SCHEDULED SATURDAY, FEBRUARY 27, 2010. I WISH TO BE A \$ \_\_\_\_\_ LEVEL SPONSOR.

WE WISH / DO NOT WISH (PLEASE CIRCLE) TO TAKE ADVANTAGE OF THE BENEFITS TO WHICH WE ARE ENTITLED (INCLUDING GALA TICKETS) AS DESCRIBED ON THE SPONSOR BENEFIT FORM.

ENCLOSED PLEASE FIND MY CHECK FOR \$ \_\_\_\_\_ OR

PLEASE CHARGE MY CREDIT CARD IN THE AMOUNT OF \$ \_\_\_\_\_

AMEX     DISCOVER     MASTERCARD     VISA

ACCOUNT # \_\_\_\_\_ EXP: \_\_\_\_/\_\_\_\_

PLEASE INVOICE ME AFTER JANUARY 1, 2010

\_\_\_\_\_  
SIGNATURE OF SPONSOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CONTACT PERSON (if different from signatory)

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
APT/SUITE:

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
POSTAL CODE

**PLEASE RETURN TO:**  
Desert AIDS Project  
ATTN: Steve Chase  
1695 North Sunrise Way  
Palm Springs, CA 92262

QUESTIONS: (760) 323-2118 EXT. 266



**Desert  
AIDS  
Project**

care :: prevention :: advocacy