



dedicated to finding a cure

## 2009 Miracles in the Moonlight Gala Partnership Confirmation (October 3, 2009 at the Sawgrass Marriott)

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Point of Contact at your company: \_\_\_\_\_

*(This is individual you want invoice sent to, receipt, partner follow up communication)*

***Please check the appropriate line that represents your partnership commitment:***

\_\_\_\_\_ **Yes, we would like to sponsor the 2009 Miracles in the Moonlight Gala at the following level:**

*(Note: Benefits listed on enclosed sponsorship opportunity brochure)*

_____ \$20,000 Presenting Sponsor Level	_____ \$ 5,000 Gold Sponsor Level
_____ \$15,000 Diamond Sponsor Level	_____ \$ 2,500 Silver Patron Level
_____ \$ 10,000 Platinum Sponsor Level	_____ \$ 1,500 Bronze Patron Level

\_\_\_\_\_ Please invoice us      \_\_\_\_\_ Check is enclosed

\_\_\_\_\_ We would like to charge to credit card  
Card Type \_\_\_\_\_ Card Number \_\_\_\_\_ VIN Number \_\_\_\_\_ Exp Date \_\_\_\_\_

**Additional Opportunities to support JDRCF:**

\_\_\_\_\_ I'm interested in providing an item for your live or silent auction at the 2009 Miracles in the Moonlight Gala.

\_\_\_\_\_ I would like to provide a donation in the amount of \$ \_\_\_\_\_ to go towards your Fund A Cure program, with 100% of my donation to go toward research.

\_\_\_\_\_ I have something else in mind. Please contact me to discuss.

**Thank you for your support - Please submit this completed form to JDRCF, North Florida Chapter**

**Fax (904) 739.2693 or email [Bbiagini@jdrf.org](mailto:Bbiagini@jdrf.org)**

**8400 Baymeadows Way, Suite # 9, Jacksonville, FL 32256**

**(Note: Checks should be written to JDRCF)**

**Tax Id # 23-1907729**