



2017 DONATIONS FORM

For more information and other payment options, please visit particle.rocks

Donor Information (please print clearly)

Name:

Company (If applicable):

Billing address:

City:

State:

ZIP Code:

Telephone (home):

Telephone (business):

Fax:

E-Mail:

PLEDGE INFORMATION

I (we) donate a total of:

Amount: Title Sponsor (\$5,000)- all below plus recognition and logo in all Mental Health First Aid program publicity and materials during the 2016/17 fiscal year.

Amount: Showcase Sponsor (\$1000 or more)- all below, business logo on stage during the event

Amount: Premiere Sponsor (\$750)- all below, plus 1 page ad in the event program

Amount: Gold Sponsor (\$500)- all below, plus ½ page ad in the event program, business logo on the event t-shirt

Amount: Silver Sponsor (\$300)- all below, plus ¼ page ad in the event program, and business logo on our website

Amount: Bronze Sponsor (\$150)- business logo on individual yard sign, business card-sized ad in the event program

Amount: Friend of Particle (\$50)- business name on wall of sponsors and event program

I (we) plan to make this contribution in the form of:

cash check

ACKNOWLEDGEMENT INFORMATION

Please use the following name(s) in all acknowledgements:

Name:

Date:

Signature:

PLEASE MAKE CHECKS OR OTHER GIFTS PAYABLE TO: *United Services, Inc.*

**Mail to: Particle Accelerator
1007 North Main Street
Dayville, CT 06241**