



SPONSOR REGISTRATION FORM

Family Assistance Ministries 30th Annual **HUNGER WALK 2017**

October 15th

Name: _____ Title: _____

Organization: _____

Email: _____ Website: _____

Phone: _____ FAX: _____

Address: _____

City: _____ State: _____ Zip: _____

I/We are pleased to make the following sponsorship/underwriting donations:

- Diamond..... \$10,000+
- Sapphire..... \$5,000-\$9,999
- Platinum \$2,500-\$4,999
- Gold \$1,000-\$2,499
- Silver \$500-\$999
- Bronze..... \$150-\$499
- Friend of FAM..... \$100-\$149

In-Kind Donation of: _____

Total Amount of Donation:.... \$ _____ Amount included Today: \$ _____

I have enclosed a check made payable to: Family Assistance Ministries \$ _____

Please charge my credit card: VISA MC AMEX

Name on card: _____ Zip Code: _____ CVA# _____

Card Number: _____ Exp: _____ / _____

Authorized Signature: _____

Email: _____

Family Assistance Ministries (TAX I.D. #33-0864870)

Or email to Info@family-assistance.org or
1030 Calle Negocio, San Clemente, CA 92673
Phone: 949.492.8477 / FAX: 949.492.8081
Attn: Hunger Walk

PLEASE RETURN THIS FORM TO:

THANK YOU FOR YOUR SPIRIT OF GIVING!

Your donation will make a difference in the lives of many hungry people in your community!

