

# SPONSOR COMMITMENT FORM

Saturday, April 24, 2010 – 1:00 pm  
California Family Fitness – Natomas  
3880 Innovator Drive  
Sacramento, CA 95834



**Yes, I want to be part of the SAFELY OUT™ “Swim for Life” event:**

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

Company/Organization: \_\_\_\_\_

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

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

Phone: (\_\_\_\_) \_\_\_\_\_ Phone (alternate): (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact (if different):

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

Phone: (\_\_\_\_) \_\_\_\_\_ Phone (alternate): (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Sponsorship Level	Amount of Sponsorship
	\$
<b>Total:</b>	\$

Payment enclosed:

Check (only if flat amount):

Credit Card:

Authorized Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration: \_\_\_\_ / \_\_\_\_ /20\_\_\_\_ Security Code: \_\_\_\_\_

Acknowledgement Information:

I wish my name/company/organization to appear in official donor recognition as follows:

\_\_\_\_\_ or  I/We wish to have our gift remain anonymous.

Signed: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ /2010

**Make donations payable to:**  
**Citizen Voice – SAFELY OUT™ Project**  
**1215 K Street – 17<sup>th</sup> Floor**  
**Sacramento, CA 95814**  
**Questions call Citizen Voice – Safely Out at (916) 503-3194**

**Official Use:**

Swim for Life

Donation Received (date): \_\_\_\_\_

Pledge Received (date): \_\_\_\_\_