



Bronze Sponsor- \$1,500

Recognition Benefits:

Company's name or logo to appear on all upcoming:

- ❖ Print publication ads
- ❖ The Mall at Green Hills kiosk posters
- ❖ Grand Finale programs
- ❖ Official campaign website

Additional company recognition on or at the following:

- ❖ Upcoming official campaign events
- ❖ Grand Finale electronic banner

Participation Benefits:

- ❖ Invitation to all upcoming campaign events
- ❖ 2 complimentary tickets to the Grand Finale
- ❖ Opportunity to submit nominations for potential 2010 MWOY candidates**

* Sponsorship Deadline: May 2, 2011

**2011 Nominations officially close in March 24, 2011.

The Mission: To cure leukemia, lymphoma, and myeloma and to improve the quality of life for patients and their families.

*For more information, please contact Monica Ramey, Sr. Campaign Manager
615-331-2980 ext. 17 or at monica.ramey@lls.org.*



**MAN & WOMAN
OF THE YEAR**

Campaign Sponsorship Commitment Form

Thank you for participating in the 2011 Man & Woman of the Year campaign! Please complete all **four** sections of this form to ensure proper seating allocation and representation of your company's name on all printed materials associated with the Man & Woman of the Year campaign.

Candidate to Support: _____

-Section 1-

SPONSORSHIP OPPORTUNITIES:

_____ Presenting Sponsor (\$10,000) _____ Gold Sponsor (\$5,000)

_____ Silver Sponsor (\$3,000) _____ Bronze Sponsor (\$1,500)

DONATION:

I would like to make a tax-deductible to the Man & Woman of the Year campaign and The Leukemia & Lymphoma Society in the amount of \$_____.

-Section 2-

Will your organization use its table/seats at the Man & Woman of the Year Grand Finale? _____

Number of seats your organization will be using: _____

-Section 3-

DONOR CONTACT INFORMATION (please print)

Name of Sponsor (as you would like it to appear on printed materials): _____

Contact Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

-Section 4-

PAYMENT INFORMATION:

_____ Check enclosed (made payable to The Leukemia & Lymphoma Society)

_____ Check sent by: _____

_____ Please charge the following credit card in the amount of \$_____.

___ Visa ___ MC Acct #: _____ Exp. Date: _____ CV Code: _____

Signature: _____

Please return this form to the Candidate. Candidates will remit donor forms to the Leukemia & Lymphoma Society.
For more information: www.mwoy.org/tn.