ROTARY LOMBARDI AWARD

10955 Cutten
Houston, Texas 77066
(p) 281- 433-3200
(f) 713- 334-9670
www.rotarylombardiaward.org

Sponsor Agreement Form
December 7-8, 2010

☐ **$25,000 Community Event/Meet the Finalist Reception**

☐ **$15,000 Sports Media Breakfast**

☐ **$15,000 Lineman's Private Reception**

☐ **$15,000 Souvenir Helmets**

☐ **$10,000 All-American**

☐ **$ 5,000 All-Conference**

☐ **$ 2,500 Letterman**

☐ **$ 500 VIP Ticket X ____ = $ _____**

☐ **$ 100 Individual Ticket X ___ = $ ___**

☐ **$ 100 Raffle Ticket X ___ = $ ___**

☐ **$ 40 Memorial X ___ = $ ___**

Name _____

_____

_____

☐ **CHECK ENCLOSED** ☐ **CHARGE MY CREDIT CARD**

_____ ___/___ _____
Visa/MC/Amex # **Exp.** **Name on card**

Please **print** all names legibly and **exactly** as they should appear in all publications.

☐ Corporate ☐ Individual ☐ Foundation

Contributor: _____

Mailing Address: _____

City/State/Zip: _____Email_____ _____

Telephone/Fax: _____

Contact Person: _____

I ☐ would ☐ would not like my name/company to appear in event publications.

_____
Signature of Donor Title Date

The Rotary Lombardi Committee sincerely thanks you for joining our efforts to fight cancer. Your contribution makes it possible for us to provide public education, patient services and further cancer research for our community. The Rotary Club of Houston Foundation Tax ID No.: 74-6084805

To be listed in program, please return this form by November 15, 2010 via **Fax** to **713-334-9670**
Or by **Mail** to **Rotary Lombardi Awards** 10955 Cutten Houston, Texas 77066
For more information: **Call 713-973-9936** or **Email rla@rotarylombardiaward.org**