

2023 CORPORATE SPONSORSHIP CASH OR CHECK PAYMENT

FIRST NAME :		_ LAST NA	LAST NAME:			
COMPANY NAME:						
LISTED AS :						
ADDRESS:						
CITY:	STATE: ZIP:					
DAY PHONE:	_ CELL PH	CELL PHONE:				
EMAIL:						
☐ PREMIER SPONSOR						
□ BRONZE SPONSOR □ COLOR TRAIL SIGN SPONSOR						
_						
PAYMENT METHOD: 🔲 CASH	H ☐ CHECK	(Make check pay	yable to Lompoc	Hospital Founda	ition)	
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	PREMIER SPONSOR	GOLD SPONSOR	SILVER SPONSOR	BRONZE SPONSOR	COLOR TRAIL SIGN SPONSOR	
	\$10,000	\$5000	\$2000	\$1000	\$200	
Featured company name & logo on Colorthon Trail Sign	J	✓	✓	1	1	
Honorable mention on all PSA, social media advertising, and website , pre-event and post event.	J	✓	√	1		
Recognition in annual newsletters reaching more than 25,000 residents.	V	✓				
30 Participants Included	V					
10 Participants Included		✓				
8 Participants Included			1			
6 Participants Included				1		