

## **SPONSORSHIP FORM**

FOR MORE INFORMATION VISIT hopeforfirefighters.org
OR email us at info@hopeforfirefighters.org

GOLD: \$25,000	– SELECT THE APPROPRIATE SPONS	SORHIP BOX: ———	
MUSTER TEAM GAMES: \$10,000	□ GOLD : <b>\$25,000</b>	☐ FOOD BOOTH:	\$2,000
BATTALION: \$7,500   FEED THE FIREFIGHTERS TICKET SPONSORSHIP: \$750   TASK FORCE: \$5,000   FEED THE BAND TICKET SPONSORSHIP: \$500   FEED THE VOLUNTEERS TICKET SPONSORSHIPS: \$500   Value:	☐ SILVER : \$20,(SOLD	☐ BEVERAGE BOO	TH: <b>\$1,500</b>
TASK FORCE: \$5,000	☐ MUSTER TEAM GAMES : \$10,000	☐ LANE KEMPER N	MUSTER TEAM: \$1,000
□ ENGINE COMPANY: \$2,500 □ FEED THE VOLUNTEERS TICKET SPONSORSHIPS: \$500 □ RAFFLE PRIZES / SILENT AUCTION: Item(s) Value: □ IN-KIND DONATIONS: Item(s) Value: □ IN-KIND DONATIONS: Item(s) Value: □ SPONSOR INFORMATION: □ OMPANY & DIVISION NAME □ ONTACT NAME □ CELL PHONE □ ONTACT NAME □ CELL PHONE □ ORK ADDRESS □ CITY □ STATE □ ZIP □ ORK PHONE □ FAX □ EMAIL □ DAINER INFORMATION □ Corporate, Food Booth, Beverage Booth & Team Sponsors are supplied with a bold lettered banner. Please write the name exactly as you want it to appear on the EVENT MAP and BANNERS. Submission deadline May 13, 2024  SIGN UP ONLINE AT WODFF. ORG/HOPESIGNUP □ PAYMENT BY CHECK PAYABLE TO: WIDOWS, ORPHANS & DISABLED FIREFIGHTER'S FUND □ VISA □ MASTER CARD □ CARD # □ EXPIRATION □ COV □ DAITE □ CODE ■ RECOURTED ■ RECOURT	☐ BATTALION: <b>\$7,500</b>	☐ FEED THE FIREFI	IGHTERS TICKET SPONSORSHIP: \$750
RAFFLE PRIZES / SILENT AUCTION: // // // // // // // // // // // // //	☐ TASK FORCE: <b>\$5,000</b>	☐ FEED THE BAND	TICKET SPONSORSHIP: \$500
IN-KIND DONATIONS: Item(s)	☐ ENGINE COMPANY: \$2,500	☐ FEED THE VOLUM	NTEERS TICKET SPONSORSHIPS: \$500
SPONSOR INFORMATION:  OMPANY & DIVISION NAME  ONTACT NAME	☐ RAFFLE PRIZES / SILENT AUCTION: Item(s)		Value:
SPONSOR INFORMATION:  OMPANY & DIVISION NAME  ONTACT NAME  CELL PHONE  ONTACT NAME  CITY  STATE  ZIP  ORK PHONE  FAX  EMAIL  BANNER INFORMATION  Corporate, Food Booth, Beverage Booth & Team Sponsors are supplied with a bold lettered banner.  Please write the name exactly as you want it to appear on the EVENT MAP and BANNERS. Submission deadline May 13, 2024  SIGN UP ONLINE AT WODFF. ORG/HOPESIGNUP  PAYMENT BY CHECK PAYABLE TO: WIDOWS, ORPHANS & DISABLED FIREFIGHTER'S FUND  EXPIRATION  CVV  CODE  REQUIRED  REQUI	□ IN-KIND DONATIONS: Item(s)		Value:
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ONTACT NAME	SPONSOR INFORMATION:		
CITY STATE ZIP  JORK PHONE FAX EMAIL  BANNER INFORMATION  Corporate, Food Booth, Beverage Booth & Team Sponsors are supplied with a bold lettered banner.  Please write the name exactly as you want it to appear on the EVENT MAP and BANNERS. Submission deadline May 13, 2024  SIGN UP ONLINE AT WODFF. ORG/HOPESIGNUP  PAYMENT BY CHECK PAYABLE TO: WIDOWS, ORPHANS & DISABLED FIREFIGHTER'S FUND  VISA MASTER CARD CARD #  EXPIRATION CW CODE REQUIRED REQUIRED  REQUIRED REQUIRED			
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□ PAYMENT BY CHECK PAYABLE TO: WIDOWS, ORPHANS & DISABLED FIREFIGHTER'S FUND  VISA □ MASTER CARD CARD # EXPIRATION CVCODE REQUIRED			
■ VISA ■ MASTER CARD CARD# EXPIRATION CVV DATE CODE CODE REQUIRED REQUIRED	- SIGN UP ONLINE AT WODFF.ORG/	HOPESIGNUP —	
□ VISA □ MASTER CARD CARD# DATE CODE REQUIRED REQUIRED REQUIRED	☐ PAYMENT BY CHECK PAYABLE TO: WIDOWS, C	ORPHANS & DISABLED FIREFIGHTER'S FUND	EVEL ATION CLA
			EXPIKATION CVV
	□ VISA □ MASTER CARD CARD#		

TO MAIL FORM & PAYMENT, SEND TO:

WIDOWS, ORPHANS & DISABLED FIREFIGHTER'S FUND Attn: Juliet Brandolino

Attn: Juliet Brandolino P.O. BOX 41903 LOS ANGELES CA 90041 FAX FORM TO: (323) 259-5215