

Sponsorship Purchase Form

This form along with money MUST be submitted by December 1st, 2020.

Contact us with any questions at fundingourheroes@trivalleycsd.org or 845-866-6281.

Information Of Person Purchasing

Your Name: _____

Phone Number: _____

Information about sponsorship

Please check the amount of the sponsorship you are purchasing.
Types of sponsorships associated with cost can be found on website at
fundingourheroes.org

\$50

\$75

\$100

\$150

Name for sponsor list (Can be in memory or honor of a veteran or active service member)

Message wanted on ad:

Check or cash included: Yes No

If yes, amount included with form: \$ _____

Checks can be made
out to *Wounded
Warrior Project*

Proud
Supporter of



**WOUNDED WARRIOR
PROJECT®**

Thank you for your
contribution to such
an amazing cause.