SPONSORSHIP FORM

THURSDAY MARCH 27TH, 2026



SPONSOR INFORMATION

NAME:	P	HONE:		
COMPANY (OPTIONAL):				
EMAIL:				
ADDRESS:				
CITY:		_ STATE:	ZIF	P:
SPONSORSHIP LEVEL				
\$1,000 - SPROUTING SPONSOR \$2,500 - BLOOMING SPONSOR		All sponsorship levels include a full table of 8 seats and will be featured in our e-brochure, event slideshow, social media		
ADDITIONAL TABLES OR TICKE	TS			
\$450 - FULL TABLE (8 SEATS)		# INDIVIDU	JAL TICKETS (S	\$45 EACH)
PAYMENT METHOD				
CHECK				
CREDIT CARD AMEX	DISCO	VER M	ASTERCARD	VISA
AMOUNT:	CARD NUMBER:			
EXP DATE:	SECURITY CODE/CCV:			
CARDHOLDER NAME (AS IT APPEAR	S ON CARD)	:		
BILLING ADDRESS:				
CITY:		STATE:	ZI	P:
SIGNATURE:		DA	TE:	

Please email a copy of this form to julie@foothillunitycenter.org

Logos must be submitted in a vector, JPEG or PDF format to wendy@foothillunitycenter.org

DUE DATE: March 6th, 2026

