

**RSVP** Your support touches the lives of those who participate in Special Olympics Iowa. Choose a sponsorship level, complete the information on the back and return this form with your check or credit card payment. Payment and guest lists are due by October 7, 2017.

Reservation Type	Guests	Cost	Select [X]
Presenting Sponsor	16	\$15,000	
Gold Sponsor	12	\$10,000	
Silver Sponsor	8	\$5,000	
Bronze Sponsor	4	\$2,500	
Ribbon Sponsor	4	\$1,000	
Team of Four Deal (non-sponsorship)	4	\$250	
Individual Tickets (non-sponsorship)	_____	\$75	
	_____	\$ _____	

If you are unable to attend, please consider a sponsorship or sponsor an athlete.

Gift levels: \$50 \$100 \$250 \$500 \$1,000 Other \$ \_\_\_\_\_



**Thank you for your support.**  
**All tickets will be available at will call the night of the event.**

## Donor Information

Name: \_\_\_\_\_

Company: \_\_\_\_\_

## Billing Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Method of Payment

\_\_\_\_\_ **Pay by phone at 515-986-5520** \_\_\_\_\_ **Enclose check made payable to** Special Olympics Iowa

\_\_\_\_\_ **Credit/debit card**    ☐ Visa    ☐ MasterCard    ☐ Discover

\_\_\_\_\_

Card Number

\_\_\_\_\_

Exp. Date

\_\_\_\_\_

Verification Code

\_\_\_\_\_

Cardholder Signature