



SPONSORSHIP / DONATION

Full Name _____ Date _____
Address _____ Phone _____
Email Address _____

**Thank you for your support! All donations are tax deductible.
Please select a specific sponsorship or enter a general donation amount at the bottom.**

Gemstone Sponsorship

- | | |
|--|--|
| <input type="checkbox"/> Pink Diamond - \$5,000 | <input type="checkbox"/> Rose Quartz - \$500 |
| <input type="checkbox"/> Pink Topaz - \$3,000 | <input type="checkbox"/> Pink Tourmaline - \$250 |
| <input type="checkbox"/> Pink Sapphire - \$1,000 | <input type="checkbox"/> Rose Gold - \$100 |

Event Sponsorship

- | | | |
|--|--|------------------------------|
| <input type="checkbox"/> 5K Gold \$1,000 | <input type="checkbox"/> Car Show | Write in Amount:
\$ _____ |
| <input type="checkbox"/> 5K Silver \$600 | <input type="checkbox"/> Sundial Resource Fair | |
| <input type="checkbox"/> 5K Bronze \$350 | <input type="checkbox"/> Calendar Event | |
| <input type="checkbox"/> 5K Pink \$150 | | |

General Donation

- | | |
|---|---|
| <input type="checkbox"/> Donation Amount \$ _____ | <input type="checkbox"/> Enclosed Check # _____ |
|---|---|

- or -

Name on Card _____	Exp Date _____
Billing Address _____	CVV Code _____
City, State, Zip _____	
Print Name _____	Signature _____

Mail To: Nor-Cal Breast Cancer Connection, P.O. Box 492191, Redding, CA 96049-2191