



Serving Beaufort, Bertie, Camden, Chowan, Currituck, Dare, Gates, Hertford, Hyde, Martin, Northampton, Pasquotank, Perquimans, Tyrrell and Washington Counties.

2024 FOOD BANK GALA SPONSORSHIP AGREEMENT FORM

Please fill out the form below and check your level of commitment to confirm your sponsorship level for Food Bank of the Albemarle's 2024 Gala Event. Completed agreements should be returned to Diana Flippo at dflipp@foodbank.org, or by mail: PO Box 1704, Elizabeth City, NC 27906-1704.

Deadline to reserve sponsorship including artwork for all marketing materials by January 12, 2024.

Company Name to be listed: _____

Contact Name: _____ Title: _____

Phone: _____ Ext: _____ Fax: _____

Email: _____ Website: _____

Address: _____

City: _____ State: _____ Zip Code: _____

LEVELS OF SPONSORSHIP

- | | |
|---|--|
| <input type="checkbox"/> Title Sponsor SOLD | <input type="checkbox"/> \$2,500 |
| <input type="checkbox"/> \$10,000 | <input type="checkbox"/> \$1,000 |
| <input type="checkbox"/> \$5,000 | <input type="checkbox"/> \$500 |
| <input type="checkbox"/> \$3,500 | <input type="checkbox"/> Friends Sponsor - \$100-\$499 |

My check payable to Food Bank of the Albemarle is enclosed

I would like to charge my sponsorship to my: VISA MasterCard AMEX

Please Invoice me as follows: Full Amount Semi Annually Quarterly Monthly

Card Number: _____ Exp. Date: _____ CVS Code: _____

Name as it appears on card: _____

Signature: _____ Date: _____

