

SPONSORSHIP COMMITMENT FORM

Yes! We will support Wedgwood Christian Services' 2017 Celebration Dinner!

Sponsorship Level & Amount: _____

Company Name (to be displayed on event materials): _____

Name & Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Please Select a Payment Option

Please send me an invoice
Send Invoice to: _____

Please charge my credit card
Name on Card: _____
Card Number: _____
Exp Date: _____ Security code: _____
Billing Address: _____

I will pay online at
WWW.WEDGWOOD.ORG/GIVING
(Please put Celebration Dinner & desired
sponsorship level in "Special Instructions")

Signature: _____

Event Details & Guest List Contact

Name: _____

Title: _____

Phone: _____ Email: _____

PLEASE COMPLETE AND RETURN THIS FORM BY SEPTEMBER 18, 2017

Send to: Nancy Lampen, Wedgwood Christian Services
3300 36th Street SE, Grand Rapids, MI, 49512
nlampen@wedgwood.org • (616) 831 - 5622