



St. Charles Fall Festival 2016

Our Festival, His Glory

Sponsorship Form

Name _____

Email _____

Phone _____

Yes, I would like to be a **GOLD** sponsor for the 2016 Fall Festival. Enclosed is my check/donation or copy of online payment receipt for \$250 or more.

Yes, I would like to be a **SILVER** sponsor for the 2016 Fall Festival. Enclosed is my check/donation or copy of online payment receipt for \$175

Yes, I would like to be a **BRONZE** sponsor for the 2016 Fall Festival. Enclosed is my check/donation or copy of online payment receipt for \$100 or less.

CUT-Off for submission of language for booth signage is **Friday, September 23rd**,

2016

Last year's sign: _____

This year's sign: _____
 (If not completed, your sign will be just like last year's)

Detach the bottom portion of this form for your records.
 ST. CHARLES CHURCH
 880 TAMARACK AVENUE SAN CARLOS, CA 94070
 PHONE: (650) 591-7349
 FAX: (650) 637-1968

DONATION RECEIPT – St Charles Fall Festival 2016
 Our non-profit tax ID number 94-1201219

NAME:

AMOUNT \$

