



Autism Society of Minnesota 2010 Steps of Hope Sponsorship Form

NAME: _____

ORGANIZATION: _____ CONTACT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ E-MAIL: _____

AuSM thanks you for sponsoring the Steps of Hope fundraising walk at the level indicated below

_____ **\$1000.00 SPONSOR**

My BUSINESS LOGO will be printed in VERY LARGE TYPE in the 2010 Steps of Hope registration brochure and on the AuSM website. AuSM will provide a link to my website and my link will be included on all of the email blasts AuSM sends out for the walk. My business name will be printed in VERY LARGE, BOLD TYPE on the back of the 2010 shirt.

My URL link is: _____.

Please email your logo to: stepsofhope@ausm.org.

_____ **\$500.00 SPONSOR**

My BUSINESS LOGO will be printed in LARGE TYPE in the 2010 Steps of Hope registration brochure and on the AuSM website. My business name will be printed in LARGE, BOLD TYPE on the back of the 2010 Steps of Hope shirt. Please email your logo to: stepsofhope@ausm.org.

_____ **\$250.00 SPONSOR**

My BUSINESS NAME will be printed in the 2010 Steps of Hope registration brochure and on the AuSM website. My business name will be printed in BOLD TYPE on the back of the 2010 shirt.

_____ **\$100.00 SPONSOR**

My BUSINESS NAME will be printed on the back of the 2010 shirt and on the AuSM website.

_____ **SAVE ME A SPONSOR TABLE! A limited number of tables are available for our sponsors at the Steps of Hope.** Merchandise sales must be approved by Ridgedale Center.

_____ I am planning to attend the Steps of Hope. I would like to reserve a sponsor table - or-

_____ I can't attend, but I will send materials to AuSM to be displayed at group table by 2/15/10.

METHOD OF PAYMENT

_____ **Check – payable to the Autism Society of Minnesota**

_____ **VISA** _____ **MASTERCARD** _____ **DISCOVER CARD**

CARD NUMBER: _____ **EXP DATE:** _____

NAME ON CARD: _____ **Signature:** _____

Please return this form & your payment by December 1st to:
Autism Society of Minnesota, 2380 Wycliff Street, Suite 102, St. Paul, MN 55114
PHONE (651) 647-1083, X 23, FAX (651) 642-1230

