



# Benefactor Sponsorship

This agreement is made between The Children's House/Child Advocacy Center and

\_\_\_\_\_  
(Name of Sponsor)

Sponsor shall provide the CHCAC with the following consideration as indicated below:

- Champion for Children, \$10,000/year
- Hero, \$5,000/year
- Star, \$2,500/year
- Advocate, \$1,500/year
- Friend, \$1,000/year
- Partner, \$500/year

.....  
Business Name \_\_\_\_\_  
(as you would like it to appear on printed materials and the CHCAC website)

Street Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Alternate Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_

## PAYMENT DETAILS

- Check enclosed. (Make payable to CHCAC)
- Invoice me.
- Bill credit card. (Complete additional information to the right.)

### CREDIT CARD PAYMENT

Name on card \_\_\_\_\_

Credit card number \_\_\_\_\_

Expiration date \_\_\_\_\_ / \_\_\_\_\_

CVV \_\_\_\_\_

Return completed form and payment, if applicable to: CHCAC, P.O. Box 335, Towanda, PA 18848

*The Children's House/Child Advocacy Center is a 501(c)3 charitable organization. Tax ID#23-2523670*