



SPONSOR INFORMATION:

Name: _____

Please list sponsorship as: _____

Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____

Email: _____

SPONSORSHIP LEVELS & BENEFITS:

- Legacy Partner: \$25,000**
Virtual admission for 20 individuals, Top level acknowledgement during event, Top level recognition in digital event materials and invitation.
- Champion: \$10,000**
Virtual admission for 15 individuals, Prominent acknowledgement during event, Prominent recognition in digital event materials and invitation.
- Defender: \$5,000**
Virtual admission for 10 individuals, Preferred acknowledgement during event, Preferred recognition in digital event materials and invitation.
- Guardian: \$3,000**
Virtual admission for 8 individuals, Recognition in digital event materials and invitation.
- Protector: \$1,000**
Virtual admission for 6 individuals, Recognition in digital event materials and invitation.
- Advocate: \$500**
Virtual admission for 4 individuals, Recognition in digital event materials and invitation.
- Friend: \$300**
Virtual admission for 2 individuals, Recognition in digital event materials and invitation.
- I prefer to make a general gift of \$ _____ to support TFN's work.

GIFT DESIGNATION (SELECT ONE):

- I/We designate this donation as a gift to benefit the hard-hitting political activism of the Texas Freedom Network.
- I/We prefer to make a tax-deductible contribution to benefit the educational and research programs of the TFN Education Fund.

PAYMENT INFORMATION (SELECT ONE):

- Enclosed is a check payable to Texas Freedom Network or TFN Education Fund
 - Credit Card: Visa MasterCard Discover Amex .
 - Card Number: _____
 - Exp. Date: _____ CVV: _____ Billing Zip: _____
 - I/We would like to pay this sponsorship in equal monthly installments of \$ _____
- (Complete the credit card information above. All pledges must be fulfilled by Friday, December 4, 2020.)

To be recognized
on the event
materials, please
respond by



SEPTEMBER 25, 2020



TFN.ORG/CHEERS

