



SPONSORSHIP REGISTRATION FORM

REGISTRATION DEADLINE MAY 5, 2023

RACE DAY
0513
2023

PLEASE COMPLETE ALL INFORMATION

.....
NAME OF COMPANY/ORGANIZATION

.....
TEAM NAME

.....
TEAM CAPTAIN

.....
EMAIL

.....
PHONE

.....
TEAM CO-CAPTAIN (IF DIFFERENT FROM ABOVE)

.....
EMAIL

.....
PHONE

.....
ADDRESS

.....
CITY/STATE

.....
ZIP

SPONSORSHIP PACKAGES

- PRESENTING SPONSOR \$30,000.00
- PLATINUM SPONSOR \$20,000.00
- GOLD DRAGON SPONSOR \$10,000.00
- SILVER DRAGON SPONSOR \$5,000.00
- IRON PADDLE CHALLENGE RACE \$2,500.00
- HIGH SCHOOL CHALLENGE RACE SPONSOR \$1,500.00
- RACE HEAT SPONSOR \$1,000.00

PAYMENT

Payment Information

Enclosed is a payment for \$

I cannot attend, but I would like to make a donation in the amount of \$ to Decatur Morgan Hospital Foundation.

Payment Method

Checks payable to Decatur Morgan Hospital Foundation.

- MasterCard Visa American Express Discover

.....
Credit Card Number

.....
Exp Date

.....
Name on Card

.....
Signature

PLEASE RETURN COMPLETED REGISTRATION FORM TO:

Decatur Morgan Hospital Foundation
PO Box 2239
Decatur, AL 35609-2239

PHONE: 256.973.2187 FAX: 256.973.2944 EMAIL: foundation@dmhnet.org

Should you prefer to register online, please go to:

WWW.DECATURMORGANFOUNDATION.ORG