

**Portland Walk to End Alzheimer's 2011
SPONSOR COMMITMENT FORM**

_____ **PRESENTING ~ \$6,000**

___ YES, we accept Walk to End Alzheimer's booth
___ NO, we decline booth use

_____ **PLATINUM ~ \$3,000**

___ YES, we accept Walk to End Alzheimer's booth
___ NO, we decline booth use

_____ **MEMORY WALL (3 available) ~ \$1,800**

Booth with signing table included

_____ **GOLD ~ \$1,500**

___ YES, we accept Walk to End Alzheimer's booth
___ NO, we decline booth use

_____ **SILVER ~ \$1,000**

_____ **BRONZE ~ \$750**

Booth space will be reserved on a 1st come, 1st served basis. Your early commitment will result in a better location.

Date Completed ____/____/____

Print your name _____

Print company name, as it should appear in print on collateral materials

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Contact Person for Sponsor
Please print name _____

E-Mail _____ Phone _____

SPONSOR PAYMENT OPTIONS - All payments due in full by August 20, 2011

Option I - Payment by Check

\$ _____ by check Check # _____

Please mail this form and check, payable to **Alzheimer's Association**, to address below.

Option II - Payment by Credit Card

Charge \$ _____ to credit card. Circle card type: VISA MasterCard

Card Number _____ / _____ / _____ Exp. Date ____/____

3-digit Security Code ____ / ____ / ____ (from back of card)

Print name as it appears on card _____

Signature - required to process payment _____

Option III - Please invoice me for amount checked at top

Billing Contact Name _____ E-Mail _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____

First installment of \$ _____ will be made by _____
(date)

Please fax (503.416.0199) or mail this form to:

Alzheimer's Association , Oregon Chapter 1650 NW Naito Parkway, Suite 190 - Portland, OR 97209

Melissa Creger, Event Coordinator • melissa.creger@alz.org • 503.416.0212

THANKS FOR YOUR COMMITMENT OF SPONSORSHIP SUPPORT!