



# Grand Traverse County Republican Party

## Fall Festival Sponsorship Donation Form

(Please Print)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Employer Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*Campaign finance law requires us to collect your employment information.

Please Select Donation Amount:

- \$500 – Includes yard sign with logo and company information placed at game you are sponsoring, signage at every table, and verbal sponsorship recognition from the stage 3 times throughout the evening.

Please make checks payable to *Grand Traverse County Republican Party* and mail along with completed form to:

Grand Traverse County Republican Party, PO Box 5226, Traverse City, MI 49696.