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CONTACT DETAILS:

Business/Organization:

Representative Name:

Representative Email:

Representative Phone #: Business Phone #:

Address line 1:

Address line 2: State: Zip:

CHOOSE YOUR SPONSORSHIP LEVEL:

\$20,000 PRESENTING PARTNER

\$1,000 BUSINESS LEADER

\$10,000 SUSTAINING PARTNER

\$500 CIRCLE OF FRIENDS

\$5,000 PARTNER SUPPORTER

\$100 BUSINESS AD

\$2,500 AWARD SPONSOR

\$25 INDIVIDUAL TICKET

PAYMENT TYPE:

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