



34TH NATIONAL VETERANS WHEELCHAIR GAMES

August 12-17, 2014 • Philadelphia, PA • Where Heroes Make History

Local Sponsor Commitment Form

For sponsorship opportunities/questions, please contact Amy Scarano at (215) 823-5945, or via e-mail at Amy.Scarano@va.gov.

COMPANY or INDIVIDUAL NAME _____				
Street Address 1 _____				
Street Address 2 _____				
City	State	Zip	Tele phone	
Sponsor Main Contact _____				
Name _____		Title _____		
Telephone _____	Cell Phone _____	Email _____		
Sponsor Fulfillment Contact (<i>responsible for providing logo art ad copy, articles, etc</i>) _____				
Name _____		Title _____		
Telephone _____	Cell Phone _____	Email _____		

34th National Veterans Wheelchair Games Commitment

\$10,000-\$13,000 .. Friend Level	\$1,000-\$2,499 Leader Level	\$ _____ Other
\$5,000-\$9,999 Partner Level	\$500-\$999 Visionary Level	
\$2,500-\$4,999 Champion Level	\$250-\$499 Supporter Level	

Choose one.

I wish to provide a donation to the 34th National Veterans Wheelchair Games ONLY in the amount of \$ _____.

OR

I wish to provide a donation to the 34th National Veterans Wheelchair Games that can be used to support future National Veterans Wheelchair Games in the amount of \$ _____.

Choose one.

Payment by check or money order (payable to "GPF 9273" with "34th NVWG" in memo line). Provide CHECK # _____.

Payment by credit card (fill out below or provide in person): _____

Amount: \$ _____	<input type="radio"/> MasterCard	<input type="radio"/> Visa	<input type="radio"/> Discover	<input type="radio"/> American Express
Card Number: _____	Expiration Date: _____			/
Security Code _____	Authorized Signature _____			
				Date _____

Mail/fax this form (and check if applicable) to:

Amy Scarano (122)

Philadelphia VA Medical Center
3900 Woodland Ave., Philadelphia, PA 19104
FAX to 215-823-6007