

\$5000

| CONTACT NAME     |  |
|------------------|--|
| COMPANY          |  |
| ADDRESS          |  |
| CITY, STATE, ZIP |  |
| EMAIL            |  |
| PHONE            |  |

We would like to be a sponsor at the following level (*t*-shirt/bag deadline is 10/7/22):

\$250 \$500 \$1250 \$2500

Contact me about volunteering during "Empowering Teens Month" in November.

Please invoice me for this sponsorship.

A check is enclosed (payable to The Bridge Teen Center).

Please charge my credit card (please include all information below).

| CARD TYPE        |  |
|------------------|--|
| CARD NUMBER      |  |
| EXPIRATION DATE  |  |
| SECURITY V-CODE  |  |
| NAME ON CARD     |  |
| BILLING ADDRESS  |  |
| CITY, STATE, ZIP |  |

SIGNATURE\_

## Please return or email this completed form to:

EMPOWERING TEENS MONTH c/o The Bridge Teen Center 15555 S. 71<sup>st</sup> Ct. Orland Park, IL 60462 aaron@thebridgeteencenter.org 708.532.0500



