



SPONSORSHIP & PARTICIPATION COMMITMENT FORM

| | |
|------------------|--|
| 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 10/4/24*):

\$250 \$500 \$1250 \$2500 \$5000

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. 71st Ct. Orland Park, IL 60462
aaron@thebridgeteencenter.org 708.532.0500

