Corporate Sponsorship History and Pledge Form

Organization: ____Allergy Partners of Fredericksburg_____

In the 2015-2016 year, your organization donated $__750_____ to FASL.

Thank you for your kind consideration of a sponsorship for the 2016-2017 year.

For the 2016-2017 year, my organization will donate the following:

- **Legacy Sponsorship ($5000)**
- **Gold Sponsorship ($1000)**
- **Silver Sponsorship ($750)**
- **Bronze Sponsorship ($500)**
- **Patron Sponsorship ($250)**
- **Friends of FASL ($100)**
- **Other Amount $_____**

I have

- **enclosed a check for the sponsorship amount.**
- **will pay through PayPal on the FASL website at www.faserviceleague.com.**

Please review our Corporate Sponsorship Levels for detailed information about sponsor benefits. All sponsor benefits will be for one year from the date of sponsorship.

Contact Information

Name: _____

Address: _____

Email Address: _____

Phone Number: _____