



SPONSORSHIP AGREEMENT FORM

____ **YES**, I will support Miracles in Motion by purchasing the following sponsorship package(s):

- | | |
|---|--|
| <input type="checkbox"/> \$10,000 Presenting Sponsor | <input type="checkbox"/> \$1,000 Core Values Sponsor |
| <input type="checkbox"/> \$7,000 Mission Sponsor | <input type="checkbox"/> \$750 Recital Program Sponsor |
| <input type="checkbox"/> \$5,000 Recital Production Sponsor | <input type="checkbox"/> \$700 Dancer Scholarship Sponsor |
| <input type="checkbox"/> \$3,000 Studio Sponsor | <input type="checkbox"/> \$500 Artistic Excursions Sponsor |
| <input type="checkbox"/> \$2,500 Summer Camp Sponsor | <input type="checkbox"/> \$300 Dancer Inclusion Sponsor |
| <input type="checkbox"/> \$2,000 Holiday Celebration Sponsor | <input type="checkbox"/> \$250 Recital Costume Sponsor |
| <input type="checkbox"/> \$1,500 Recital Stage Sponsor | <input type="checkbox"/> \$200 Dancer Summer Camp Scholarship Sponsor |
| | <input type="checkbox"/> Fill-in line here for custom amount \$ _____ |

Sponsor's Name (as you want it listed) _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ ZIP _____

Phone # _____ Email _____

Website: _____ Facebook: _____ Instagram: _____

Please email this agreement form when completed along with your color logo in .jpg format to **Miraclesinmotion07@gmail.com**. If selecting a sponsorship package above \$500, include a vectored art file (.eps or .ai) of your logo as well. Due April 1st.

I agree to purchase the sponsorship package that I have checked above by:

☐ Check or ☐ Credit Card (use QR Code)



Authorized Signature _____

Date _____

