SPIRIT SPRINT

Orthopedic ONE Spirit Sprint 5k - Sponsorship Form

Company Name (as you would like it to ap	ppear in print):		_
Address:			_
Contact Name:	Phone:		_
Web Address: www			_
Company Facebook page: www.Facebool	c.com/		_
Email:			
Do you plan to have company representat	tives at the event (10/07/2018)?		_
Please check your sponsorship level:			
Level I – Presenting Sponsor (\$7,500)			
Level II – Premier Sponsor (\$5,000)			
Level III – Gold Sponsor (\$2,500)			
Level IV – Silver Sponsor (\$1,000)			
Level V – Bronze Sponsor (\$500)			
In-Kind Sponsor (TBD)			
(Brief description in-kind of item(s):)
SIGNATURE:		DATE:	

Please return completed form via email to spiritsprint5k@orthopedicone.com or fax to 614.827.8371

Sponsorship confirmation must be received by <u>August 1st</u> to be included on print collateral. The final deadline for sponsors to be recognized on race day signage, t-shirts and additional promotional materials is <u>September 10, 2018</u>. Sponsorship payment is due by <u>October 1st, 2018</u>.

Checks can be made payable to Columbus Running Company and mailed to the address below.

Columbus Running Company/Orthopedic ONE Spirit Sprint 5k

Avery Square, 6465 Perimeter Dr, Dublin, OH 43016