

Out of Zion, Inc

PO Box 46713 Tampa, FL 33646 oozion@yahoo.com | 917-319-9764

2024 SPONSORSHIP RESERVATION FORM

(Please type or use blue or black pen)

Sponsor Contact Information: Please reserve the following sponsorship for myself / my company. COMPANY/DONOR NAME – FOR CATALOG: (As it should appear in catalog)		
CONTACT NAME:	ADDRESS:	
TITLE:	CITY:	STATE: ZIP:
EMAIL: (This is how we will send your receipt. Please print cl	early)	PHONE:
Sponsorship Information: SPONSORSHP/DONATION AMOUNT:		
SIGNATURE:		DATE:
Payment Information: Payment is due at time of registration.		
☐ Check enclosed payable to <u>Out of Zion</u>	☐ Credit Card Payments can be made on our website: https://www.hope4atrt.org/fundraiser	
SIGNATURE:		DATE:
For office use only:		
TRACKING NUMBER: NOTES:		

Please return this form and payment by September 27, 2024 to:

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Hope4ATRT.org