



**15th Annual "This Run's For Jack"**  
**10.14.18 • 5k Run/Walk**  
**Ackerman Park • Glen Ellyn, IL**

# SPONSOR REPLY FORM

*It just takes 3 simple steps...*

## STEP 1 Contact Information (please print clearly)

Sponsor Name \_\_\_\_\_

*This is the way the sponsorship listing will appear on printed materials unless otherwise indicated.*

Contact Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## STEP 2 Select Sponsorship Level (Please see enclosed brochure for recognition details)

- |  |         |   |       |
|--|---------|---|-------|
| <input type="radio"/> Elite Sponsor        | \$2,500 | <input type="radio"/> Community Sponsor   | \$500 |
| <input type="radio"/> Melanoma Family Tent | \$1,500 | <input type="radio"/> Honor Tribute*      | \$500 |
| <input type="radio"/> Skin Check Tent      | \$1,500 | <input type="radio"/> Kids Zone           | \$500 |
| <input type="radio"/> Premium Sponsor      | \$1,000 | <input type="radio"/> Supporting Sponsor  | \$250 |
|  |         | <input type="radio"/> Mile Marker Sponsor | \$150 |

\*Please print tribute name: \_\_\_\_\_

We are unable to participate at a specified sponsor level, but would like to make a contribution of \$ \_\_\_\_\_

We plan to provide support by an in-kind product donation of:

\_\_\_\_\_  
(please specify donation and market value)

## STEP 3 Payment and Return (Tax ID#20-1363653)

Enclosed is a check payable to Jack's Fund in the amount of \$ \_\_\_\_\_

VISA     MC    Name on Card \_\_\_\_\_

# \_\_\_\_\_ Exp. \_\_\_\_\_ / \_\_\_\_\_ security code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Email, fax or mail this form to:**  
**info@jacksfund.org • Fax: 630.230.3808 • Jack's Fund, P.O. Box 436, Glen Ellyn, IL 60138**

**Complimentary race entries may be redeemed once registration opens.**  
**A special registration code will be provided. Consider forming a corporate team!**