

## SPONSORSHIP/DONATION FORM 2024

Business/Family Name:					
Mailing Address:					
Phone Number:					
Email Address:					
Sponsorship Level or Donation (check one):	Bronze \$500		Gold \$2,500	Platinum \$5,000	Donation \$
Name as it should appear on prin	nt materials:				
Item being donated:					
Retail Value:	Expiration Date:				
Please explain your donation belo	ow:				
Check # ( <i>mak</i>	e checks payabl	le to St. Mary Co	athedral Schoo	n/)	
Cash					
Credit card number:	Credit card number:			Exp. date: Sec. Code:	
Signature:					