



# **SPONSOR OUR 10TH ANNUAL WALK OF LIFE!**

## **SEPTEMBER 25, 2021**

**We invite you to support our lifesaving cause by sponsoring our walkathon.**

Your contribution will help us continue our outreach and community education programs, organize donor recruitments in our communities, expand our donor database beyond the current 32,000 registered donors, as well as help defray costs associated with the collection and cataloging of tissue types from potential stem cell donors.



## **WALK FOR THE ARMENIAN BONE MARROW DONOR REGISTRY**

# SPONSORSHIP OPPORTUNITIES



## For the 10<sup>th</sup> Annual Watertown Walkathon

In Support of

**ARMENIAN BONE MARROW DONOR REGISTRY**

Saturday • September 25, 2021 • Watertown, MA



Company / Organization \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**EVENT SPONSOR \$10,000**

~ Principal Sponsor benefits

~ Full Page Ad included in the Annual ABMDR Newsletter | distribution 20,000 copies

~ Your logo\* on event flyer, website, and all marketing materials

**PRINCIPAL SPONSOR \$5,000**

~ Major Sponsor benefits

~ Your logo\* and contact info included in the Annual ABMDR Newsletter | distribution 20,000 copies

**MAJOR SPONSOR \$3,000**

~ Sustaining Sponsor benefits

~ Your logo\* included in on all New England Walkathon promotional material • all social media promotions

**SUSTAINING SPONSOR \$1,000**

~ Sponsor benefits

~ Your logo\* displayed on a poster at the Watertown Faire on the Square

**SPONSOR \$500**

~ Supporter benefits

~ Your logo\* displayed on a poster at the Watertown Faire on the Square

**SUPPORTER \$100**

~ Your name included in ABMDR's Walk of Life T-shirts worn throughout the event

~ Your name included in ABMDR'S website and all New England Walkathon email blasts

### Payment Method

AMOUNT \$ \_\_\_\_\_ (Make your tax-deductible donation payable to ABMDR)

Please select one:  CHECK  MASTER CARD  VISA

NAME ON CARD \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**\*Logo Requirements:** 300 dpi Minimum 5" x 7" size in PDF, EPS, JPG, or TIF format. Email to [ne@abmdr.am](mailto:ne@abmdr.am)

ABMDR is a 501(c)(3) not for profit organization • Tax ID # 05-0573780  
Please Mail Checks to 26 Walnut St, Watertown, MA 02472 • [www.abmdr.am/ne](http://www.abmdr.am/ne)

