

Armenian Bone Marrow Donor Registry
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www.abmdr.am



“Walk of Life Fresno 2011” Oct 15, 2011
ARMENIAN BONE MARROW SPONSORSHIP FORM

Company _____
Address _____
City _____ State _____ Zip Code _____
Phone (____) _____ Cell (____) _____ Email _____

SPONSORSHIP LEVELS

- MAJOR SPONSOR *\$1,000*
 - Corporate name integrated into name of event
 - Opportunity to have a corporate display at the Walk of Life
 - Name in front of T-shirt
 - Company logo on ABMDR’s Website
- SPONSOR *\$500*
 - Name on back of T-shirt
 - Company logo on ABMDR’s website
- 1K SPONSOR *\$100*

<input type="radio"/> Check	<input type="radio"/> Cash	<input type="radio"/> Master Card	<input type="radio"/> Visa	<input type="radio"/> AMEX
Credit Card # _____	Exp. Date _____			
Sponsorship \$ _____	Sponsor Name _____			
Total \$ _____	Sponsor Signature _____			
Deposit \$ _____	Date _____			

Please make your tax deductible donation payable to: ABMDR 347 West Stocker Street #208, Glendale, CA 91202
The ABMDR is a 501 (c) (3) not for profit organization. Tax ID # 05-0573780