



Partnership & Sponsorship Registration Form

Partnerships: \$7,500 - Mission Partner \$2,500 - Connecting Partner \$500 - Awareness Partner
 Recurring Payments \$5,000 - Community Partner \$1,000 - Supporting Partner

Family Event Sponsorships: \$2,000 Trivia Night Round Sponsor Recurring Payments
 \$1,000 Family Game Night Advocate Sponsor \$1,000 Trivia Night Advocate Sponsor \$1,000 Trunk or Treat Advocate Sponsor \$1,000 Breakfast with Santa Advocate Sponsor
 \$500 Family Game Night Friendship Sponsor \$500 Trivia Game Night Friendship Sponsor \$500 Trunk or Treat Friendship Sponsor \$500 Breakfast with Santa Friendship Sponsor

Young Adult Connection Sponsorships: \$5,000 - Mission Sponsor \$2,500 - Advocate Sponsor \$600 - Friendship Sponsor
 Recurring Payments

My Summer Journey Sponsorships: \$5,000 - Mission Sponsor \$2,500 - Advocate Sponsor \$600 - Friendship Sponsor
 Recurring Payments

Partner / Sponsor Information

Business/Organization Name

Contact Name

Email

Phone number

Payment Type

Send Invoice

Please check

Check Enclosed

Address

Please make check payable to *Autism Community Connection*. Then send this form and check to:

Autism Community Connection
2455 Fairview Place, Box 2
Greenwood, IN 46142

*If you have any questions contact Kelli Higgins, Executive Director
k.higgins@autismcc-in.org or call 317-676-4222 x101*