

Donation Sponsorship Form



Our Mission: To leave no child hungry. We believe a child will study more and have more opportunity for success if they start their day with a full belly versus wishing they would have a meal.

Donor Information (please print or type)

Name

Billing address

City, ST Zip Code

Phone 1 | Phone 2

Fax | Email

Sponsor Information

I (we) will sponsor a total of \$ _____

Credit card type | Exp. date | CVV

Credit card number Authorized

signature.

Acknowledgement Information

Please use the following name(s) in all acknowledgments: _____

Please mark us down as a

- Title Sponsor (\$20,000)
- Premier Sponsor (\$10,000)
- Social Sponsor (\$5,000)
- DeLorean Sponsor (\$5,000) (Only 1 Available)
- Friends of BetterALife Sponsor (\$3,500)
- General Support (Any amount)
- I (we) wish to have our gift remain private

**Please make checks, corporate
matches, or other gifts payable to:**

**BetterALife
201 N Maple Ave
Unit F
Purcellville, VA 20132**

Signature(s)

Date

Your donation is tax deductible.

(EIN 81-4450998)