

## **Program Support and Sponsorship Confirmation**

Please mail this form to Women of Toledo, 425 Jefferson St., 3rd Floor Toledo OH 43604 Or Email: info@womenoftoledo.org

Company Name:		
Full Name:		
Address:		
City:	State:	Zip:
Email Address:		
Website Address:		
LEVELS OF CONTRIBUTION:		
CIRCLE OF FRIENDS-Ind. Support  YGOT/ NextGens (14-17) \$10	<ul><li>CIRCLE OF 3E Ambassador \$150</li><li>*(Individual/Small Groups)</li></ul>	CIRCLE OF PARTNERSHIP \$1,250 *(Org. General Support for 1 month)
<ul><li>✓ Young Women (18-24) \$20</li><li>✓ Women (25-49) \$30</li><li>✓ Legacy (50+) \$40</li></ul>	CIRCLE OF COMMUNITY \$250 *(Supports/Sponsor 1 program)	CIRCLE OF ADVOCACY \$3,000 *(Org. Overhead for 1 month)
Other Amount:	CIRCLE OF LEADERSHIP \$500 *(Supports 2 program series)	CIRCLE OF SUSTAINABILITY \$5,000
O Recurring of \$10/a month	CIRCLE OF COLLABORATION \$1000 *(Supports Special Program)	*(Org. Operating Quarterly)
**Please also prepare to email your co	mpany logo, in vector or pdf format to <u>inf</u>	o@womenoftoledo.org.
I would also like the opportunity to give my time to the organization. Area (s) of Interest:  MENTORSHIP ODVOCACY OUTREACH OLEADERSHIP OVOLUNTEER OYOUTH FUNDRAISING		
METHOD OF PAYMENT:		
Check (Please make check payable **Credit Card Info	e to Women of Toledo) or Onvoice p.	ayment online
Number: Expire:		
CVV (3-digit code):		
Billing address:  **I am authorizing Inclusive Women of Toledo Inc. to charge the card info and amount of		
Signature:		
All questions should be directed to Nina Corder @419.377.5457 or emailed to nina@womenoftoledo.org		

**Our Current Funders and Supporters:** 











