



SPONSORSHIP FORM
2025 JOSEPH J. CASSIDY MEMORIAL 5K ROAD RACE, KIDS' RUN & FAMILY WALK
SATURDAY APRIL 26, 2025

NOTE: ALL DONATIONS MUST BE RECEIVED BY 5:00 P.M. On APRIL 8, 2025 TO ENSURE SPONSORSHIP IS PRINTED ON T-SHIRTS.

**THE JOSEPH J. CASSIDY MEMORIAL 5K ROAD RACE, KIDS' RUN & FAMILY WALK
TAKES PLACE ON SATURDAY, April 26, 2025 AT THE MDC RESERVOIR,
FARMINGTON AVENUE, WEST HARTFORD.**

Sponsorship Information

Name of contact: _____

Sponsor name (exactly as it is to appear on the back of T-shirts) :

Email Address: _____ Phone: _____

Sponsorship Levels:

☐ **Sponsorship 1:** I/We would like to donate \$200.00 in support of the Joseph J. Cassidy Memorial 5K Road Race, Kids Run & Family Walk. Donor of \$200 or more will receive special recognition in e-newsletter and prominent placement of name on t-shirt.

☐ **Sponsorship 2:** I/We would like to donate \$100.00 in support of the Joseph J. Cassidy Memorial 5K Road Race, Kids Run & Family Walk. Donor of \$100 or more will receive special recognition in email invitations and placement of name on t-shirt.

☐ **Sign Sponsorship 1:** \$500 for a Finish Line sponsor sign, recognition in email invitations and placement of name on t-shirt

☐ **Sign Sponsorship 2:** \$350 for a mile marker sponsor sign, recognition in email invitations and placement of name on t-shirt

Payment information:

☐ Please find enclosed my check for \$_____ Please make your tax-deductible checks payable to the Hartford County Bar Foundation and mail check with completed sponsorship form to: Hartford County Bar Foundation, 100 Pearl Street, 4th floor, Hartford, CT 06103.

☐ **Credit Card information:** ☐ Amex ☐ Visa ☐ MC

Credit Card # _____ Exp. Date _____ CVV # _____

Name on credit card: _____

Billing Address: _____

Signature: _____