

7TH ANNUAL WALK FOR LIFE

SATURDAY, AUGUST 30, 2025

Sponsor Form (Registration to attend event is separate)

SPONSOR NAME: _____

PHONE NUMBER: _____

MAILING ADDRESS: _____

EMAIL: _____

COMPANY WEBSITE: _____

I/We will sponsor the *Walk For Life* at the following level:

MARATHON \$2,000 _____ [Company logo & website link on Event page, logo on back of t-shirt, logo advertising on our Facebook page, (3) free t-shirts] - What sizes? (XS-XXL): _____, _____, _____

SPRINT \$1,000 _____ [Company logo & website link on Event page, logo on back of t-shirt, logo advertising on our Facebook page, (2) free t-shirts] - What sizes? (XS-XXL): _____, _____

RUN \$500 _____ [Company name on back of t-shirt, (2) free t-shirts] - What sizes? (XS-XXL): _____, _____

JOG \$250 _____ [Company name on back of t-shirt, (1) free t-shirt] - What size? (XS-XXL): _____

WALK \$100 _____ [Company name on back of t-shirt, (1) free t-shirt] - What size? (XS-XXL): _____

Payment:

☐ Pay online:



☐ Check made out to Pregnancy Resource Connection enclosed.

☐ Credit Card:

Number: _____

Name on Card: _____

Expiration: _____ CVC (3 digits on back of card): _____

Please mail or scan this form back to us, with your payment, to:

Pregnancy Resource Connection
PO Box 187

Have a question? Contact us at:
970-887-3617

SPONSORSHIP DEADLINE IS
AUGUST 7TH

As soon as we receive your sponsorship, we will contact you to discuss the time frame to receive your company logo, if needed.