

Infirmary Health



\$10,000 – Title Sponsor

- Diamond Level incentives
- Company representative officially starts RIDEYELLOW
- Commemorative RIDEYELLOW T-shirt with logo recognition*
- 10 complimentary rider registrations

\$5,000 - Food Sponsor

- Platinum Level incentives, signs and included in advertisement
- VIP rider starting position
- 8 complimentary rider registrations

\$2,500 - Platinum Level

- Gold Level incentives
- Company logo listed on printed registration form and poster*
- 4 complimentary rider registrations

\$1,000 - Gold Level

- Silver Level Incentives
- Company logo hyperlinked on website*
- Company logo on rider/volunteer T-shirt*
- Company recognition on yellow carpet photo backdrop*
- 3 complimentary rider registrations

\$500 - Silver Level

- Bronze Level incentives
- Opportunity to set up tent for promotional giveaways at packet pick-up and finish line
- Company recognition on rider/volunteer T-shirt*
- 2 complimentary rider registrations

\$250 - Bronze Level

- Paceline Supporter incentives
- Company logo on website*
- 1 complimentary rider registration

\$100 - Paceline Supporter

- Company recognition on website

August 19, 2023 is the sponsorship deadline. If you miss the deadline, adjustments to sponsorship benefits may be made by the RIDEYELLOW committee.

*A pdf of your company logo must be emailed to Devin.Clarke@infirmaryhealth.org by August 1.

P.O. Box 1409 • Bay Minette, AL 36507 • 251-937-9099 • rideyellow@infirmaryhealth.org

RIDEYELLOW and NORTH BALDWIN FOUNDATION are 501(c)(3) nonprofit organizations. All contributions are tax-deductible as allowed by law.

Infirmary Health



SPONSORSHIP FORM

- Title Sponsor (\$10,000)
- Food Sponsor (\$5,000)
- Platinum Level (\$2,500)
- Gold Level (\$1,000)

- Silver Level (\$500)
- Bronze Level (\$250)
- Paceline Supporter (\$100)
- In-kind Donation

Please make checks payable to: **RIDEYELLOW**

Please mail to:

North Baldwin Fitness Center
Attention: Devin Clarke
P.O. Box 1409
Bay Minette, AL 36507

**.pdf of company logo must be emailed to
Devin.Clarke@infirmaryhealth.org by
August 1. to be included with
sponsor benefits.**

In-kind donation product: _____

Fair market value \$ _____

«Company»
«Bus__Street»
«Bus__City», «Bus_State»
«Bus__Zip»

Company contact: _____

Phone: _____

Email: _____

Website: _____

Address: _____

Please provide the following information, if different from above:

Name: _____ Business or personal - Exactly as it is to be listed on incentive material

Address: _____

City/state/zip: _____

This sponsorship is given anonymously.

Do not include company name on any advertising/marketing materials.

Donating in memory of: _____

Donating in honor of: _____

In order for your business name to appear on the promotional materials, ALL PAPERWORK must be received no later than August 1, 2023.

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