



Sponsor #	Date Rec'd	Round #
	Design #	Location #

SPONSORSHIP PLEDGE FORM

*Thank you for participating in this fantastic art exhibition.
With your support, we will make this event a tremendous success.*

Organization or Individual Name: _____

Name and Website: _____
(as you want it to appear on all marketing material; ex., website, media release, recognition plaque)

Address: _____

City, State Zip: _____

Contact Name: _____

Contact Phone: _____ Contact Fax: _____

Contact Email: _____

Preferred Gecko Artist/Location: _____

- | | | | |
|--------------------------|--------------------|-----------|---|
| <input type="checkbox"/> | GRAND GECKO | \$ 25,000 | Payment by Check / Credit Card |
| <input type="checkbox"/> | Glorious Gecko | \$ 15,000 | CC # _____ Exp _____ |
| <input type="checkbox"/> | Groovy Gecko | \$ 10,000 | <input type="checkbox"/> Bill me at the address above |
| <input type="checkbox"/> | Gallant Gecko | \$ 5,000 | x _____ |

Signature

Upon receipt of Sponsorship Pledge Form, KHF will contact sponsor to secure pledge. Once completed, KHF will make available the Approved Artist and Location Roster. KHF will contact the artist and coordinate delivery of the blank gecko for decoration.

*Donations to **Geckos in Paradise** are tax-deductible. Contact your tax representative.
Kapi'olani Health Foundation's Federal Tax ID number 99-0246364.*