



Underwriting Commitment Champion of Life Benefit Gala

Name (s) _____

Address _____

City _____ ST _____ Zip _____

Phone _____ Email _____

Underwriting Levels:	Title	\$15,000 +
	Presenting	\$10,000
	Platinum	\$5,000 - \$7,500
	Gold	\$2500 - \$5000
	Grand	\$1,000 - 2500

By underwriting this benefit dinner, your name will appear in our program booklet and on our website. *(see attached information sheet for more particulars)*

_____ Yes! I/We will help underwrite the dinner at the _____ level

Enclosed is our donation of \$ _____

_____ Yes! I/We will help underwrite the dinner at the _____ level

I/We prefer to pay by credit card; please call me/us at this phone number to process payment: _____

___ We will also be honored to serve as one of the table hosts inviting a total of 10 guests including ourselves) at our table.

West Pasco Pregnancy Center, Inc. is a 501C3 tax exempt charity recognized by the Internal Revenue Service.

West Pasco Pregnancy Center is a registered charity with the State of Florida under Section 496.405. Information is available upon request regarding its financial statements and the tax deductibility of your contribution. ***A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.***