



9/11 HEROES RUN PLEDGE FORM

IMPACT YOUR COMMUNITY AND HONOR OUR HEROES

LOCAL TITLE SPONSOR \$10K 15 complimentary race spots and your choice of 6 options from the following list in addition to all offerings in the chart below:

LOCAL PRESENTING SPONSOR \$5K 10 complimentary race spots and your choice of 3 options from the following list as well as all offerings in the chart below:

- Inclusion on national runner email
- Opportunity to share remarks at opening ceremony
- Additional 5 runner spots
- Logo on main stage (sponsor provides - 6x4 or less)
- Company signs along the route
- Logo placement on bibs of your race location
- TMF Spartan Society Membership - Silver Level
- Company branded water station (can be manned by company volunteers)

**Please contact the Foundation for a sponsorship above \$10K*

LOCAL SPONSORSHIP LEVELS	Local Gold Sponsor \$2,500	Local Silver Sponsor \$1,000	Local Bronze Sponsor \$500	Local Red Sponsor \$350	Local Blue Sponsor \$200	Local White Sponsor \$100
Live PA Announcement of Support						
Corporate Banners on Race Course (Sponsor Provides)						
Logo on Start/Finish Banner						
Social Media Mentions						
Logo on 9/11 HR Posters/Brochure						
Logo/Link on 9/11 HR Webpage						
Option to Provide Offer in Runner Bag						
Complimentary Runner Spots	8	5	4	3	2	
Booth Space in Vendor Area						

Thank you for your pledge to Travis Manion Foundation. Your pledge will allow us to continue to empower our nation's Veterans and Families of the Fallen. Please confirm the terms and conditions of your pledge below. Checks can be made out to: 9/11 Heroes Run. Please put the race location in the memo section of the check. You can mail your check and the completed form below to:

Travis Manion Foundation, P.O. Box 1485, Doylestown, PA 18901

Pledged By (please print contact name): _____

Company Name: _____

Address: _____

Contact Phone Number: _____ Contact Email: _____

Amount Pledged: \$ _____ or description of non-cash item: _____

9/11 Heroes Run Race (City, State): _____

Pledge Terms: One-Time Payment: \$ _____ Recurring Payment: \$ _____ please circle one: Monthly Quarterly Annually

If there are any restrictions or conditions that you wish to place on your pledge, please indicate here: _____

Authorization: I/we acknowledge my/our pledge to the Travis Manion Foundation with the terms and conditions expressed above.

Signature: _____ Date: _____

For internal use only

ACCOUNT CODE _____ CLASS CODE _____ Additional Pledge Details (Event, Program): _____

Accepted by (please print) _____ Signature _____ Date _____