Columbia Community Foundation Sharing Today . . . Investing in Tomorrow



Fall Gala Sponsorship Form

Total value: _____

Yes, we wish to be a sponsor of the Foundation's Fall Gala Sponsor Name (please list as it should appear in print) Address: _____ City/State/Zip: Contact Name/Title: _____ Email: ☐ Investor \$5000+ (includes 2 tables of eight) ☐ Patron \$300+ (includes 2 reservations) ☐ Founder \$2400+ (includes 2 tables of eight) ☐ Supporter \$150+ (includes 1 reservation) ☐ Other_____ ☐ Bronson \$1200+ (includes 1 table of eight) ☐ I/We wish to remain anonymous Copopa \$600+ (includes 4 reservations) We are unable to be a sponsor, but enclosed is a tax deductible contribution of: \$_____ Total Payment Amount: \$_____ ☐ MasterCard ☐ Discover ☐ Check No._____ □ Visa Card Number: Name on Card: Name on Card:

Expiration: _____ CVV Security Code: _____ Signature: _____ If you would like to donate an item for our live/silent auction, please list the item and value: Value \$ Value \$

Completed forms must be returned to Fall Gala, Columbia Community Foundation, P. O. Box 567, Columbia Station, Ohio 44028 before October 30, 2025, to be included on our digital board.

(Registered 501(c)(3) Non-Profit Public Charity)

I will need the item picked up _____