

### Sponsor Information

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Preferred phone (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

### Gift Information

We commit \$\_\_\_\_\_ to join in sponsorship for **Changing the Conversation**.

Enclosed is our check made payable to the Community Foundation, the fiduciary agent for this partnership.

Please charge my Visa or MasterCard.

Credit Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Donor Recognition** Please use the following listing for our sponsorship in all acknowledgments.

Our company's logo will be emailed to [jrichardson@cfgr.org](mailto:jrichardson@cfgr.org).

### Donor Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Thank you for your generosity!**

#### Please mail to:

The Community Foundation  
Two Tower Place  
Albany, NY 12203

#### Questions?

Please call the Community Foundation offices at  
518-446-9638.

*Community Partnership of*

