



DONOR INFORMATION

* Asterisk indicates a required field

Company Name* _____

First Name* _____

Last Name* _____

Email _____

Phone* _____

Street* _____

Street _____

City* _____

State/Province* _____

Zip/Postal Code* _____

Donor wishes to be acknowledged as:

SPONSORSHIP INFORMATION

Donation amount:

___ Platinum Sponsor: \$20,000

___ Gold Sponsor: \$10,000

___ Silver Sponsor: \$5,000

___ Bronze Sponsor: \$2,500

___ Copper Sponsor: \$1,000

___ Check Enclosed

(Payable to *Los Angeles AAZK.*)

___ Credit Card

Card Type _____

Credit Card Number: _____

Expires: _____

SPONSORSHIPS MUST BE MADE TO L.A. AAZK AND RECEIVED NO LATER THAN JUNE 1, 2021.

Signature: _____ Date: _____

Please return to:
Los Angeles AAZK
Attn: 2021 Conference
5333 Zoo Drive
Los Angeles, CA 90027

For more information contact:
Samantha Derman or Jill Werner at laaazk2021@gmail.com.

