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22nd ANNUAL Thanksgiving Dinner Give-Away

**November 23, 2021
Sponsorship Pledge Form**

Company Name: _____
(Name as you wish it to appear in recognition materials)

Contact Name: _____ **Title:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Email: _____

Level of Sponsorship
Presenting Sponsor-\$5000
Title Sponsor-\$7500

Sponsorship Signature: _____ **Date:** _____

Make Checks payable to:
Darrell Armstrong Foundation for Premature Babies, Inc.
P. O. Box 608833
Orlando, FL 32860