



to benefit  
Brehon Institute for  
Family Services, Inc.

**CALENDAR SPONSORSHIP AGREEMENT**

**Company Name:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

I would like to support Brehon Institute’s mission of improving the lives of children and their families. Completion of this agreement confirms the following commitment:

- \_\_\_\_\_ Blue Ribbon Baby Calendar presenting sponsor - \$1,000
• Recognition on the calendar cover – “Presented by...”
• 1/2 page ad with company name and/or logo inside the front cover of the calendar
• 4 tickets to the Blue Ribbon Charity Ball
• Recognition at the Blue Ribbon Charity Ball
- \_\_\_\_\_ Individual month sponsor - \$100 (each ad)
• 2” by 3.5” business card sized ad
• 12 months available

TOTAL Amount Enclosed: \$ \_\_\_\_\_

Calendar sponsorship agreement forms may be faxed to Brehon Institute at 850.656.7127 or mailed or delivered to Brehon’s main office at 1311 North Paul Russell Road, Suite A204, Tallahassee, Florida 32301. In order to receive full recognition in the 2010-2011 calendar, all Calendar Sponsorship Agreement forms and payment must be received by Brehon Institute by **March 1, 2010**. Please make checks payable to Brehon Institute or complete the information below for payment by credit card.

Agreed to by:

\_\_\_\_\_  
Signature, Authorized Representative Date

**If your company prefers to pay by credit card, please complete the following information:**

circle one: VISA MASTERCARD CARD NUMBER: \_\_\_\_\_  
NAME ON CARD: \_\_\_\_\_ EXPIRATION: \_\_\_\_\_  
AUTHORIZED SIGNATURE: \_\_\_\_\_