



# Sponsorship Opportunities

## Folks on Spokes | Step Forward Memorial Walk

### Sunday, September 16, 2018

Charity ride and walk along the beautiful Southern Connecticut Shoreline

<i>Sponsor Benefits</i>	Platinum \$5,000	Gold \$2,500	Silver \$1,500	Bronze \$1,000	Rest Stop \$500	T-shirt \$250
<b>PRE-EVENT RECOGNITION</b>						
Recognition on event website and social media sites	✓	✓	✓	✓	✓	
Logo and link on event website	✓	✓	✓	✓		
Link on event website					✓	
Mention in event press release	✓	✓				
<b>EVENT DAY RECOGNITION</b>						
Business logo on event t-shirt	✓	✓	✓			
Business name listed on event t-shirt				✓	✓	✓
Business name on sponsor banner	✓	✓	✓	✓	✓	✓
Signage at rest stop					✓	
Verbal recognition during event	✓	✓	✓	✓	✓	
<b>POST –EVENT RECOGNITION</b>						
Mention in post event press release	✓	✓				



941-949 Bridgeport Avenue | Milford, CT 06460  
 Phone: 203.878.6365  
[www.bridgesct.org](http://www.bridgesct.org) | [facebook.com/BridgesConnecticut](https://facebook.com/BridgesConnecticut)

Proceeds help Bridges provide mental health, addiction and primary healthcare services.  
 Bridges is a 501 (c) 3 organization. FIN 06-0867978.  
 Your donation is tax deductible to the fullest extent permitted by law.



**With your support, Bridges helps thousands achieve better health and recovery.**

Founded in 1957, Bridges provides a comprehensive range of outpatient mental health, addiction, primary care, community support, prevention and intensive home-based services for children, adults and families in Milford, Orange, West Haven, and their surrounding communities. Since its inception, Bridges quality programs and services have helped individuals and families move toward recovery.

To become a sponsor please complete the form and return to Bridges' Development Office, 949 Bridgeport Ave., Milford, CT 06460 or visit [www.bridgesct.org/sponsors](http://www.bridgesct.org/sponsors)

***Thank you!***



***Yes, I will be a 2018 Folks on Spokes /Step Forward Memorial Walk Sponsor!***

Business Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\$5,000 \_\_\_\_\_ \$2,500 \_\_\_\_\_ \$1,500 \_\_\_\_\_ \$1,000 \_\_\_\_\_ \$500 \_\_\_\_\_ \$250 \_\_\_\_\_

My check is enclosed \_\_\_\_\_ Send an invoice \_\_\_\_\_ Bill my credit card\* \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CSC \_\_\_\_\_

\*Please ensure correct credit card billing name and address on this form.