



# JBWS SPONSORSHIP REGISTRATION FORM

ORGANIZATION NAME: \_\_\_\_\_  
(Exactly as you would like it to appear on sponsor signs, promotional or written materials, and auction websites)

CONTACT NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

- Grand Tastings Sponsorship Level: \_\_\_\_\_ Amount: \_\_\_\_\_
- Verizon Hope Classic Sponsorship Level: \_\_\_\_\_ Amount: \_\_\_\_\_
- Autumn Auction for Hope Sponsorship Level: \_\_\_\_\_ Amount: \_\_\_\_\_
- Contribution (In lieu of attending) Amount: \_\_\_\_\_

VISA    MasterCard    AMEX    Check enclosed    Check to follow in the mail    Send an invoice

(Please make checks payable to JBWS)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

**CONTRIBUTIONS are appreciated and will be recognized. If your company has a MATCHING GIFT PROGRAM, please consider JBWS as a recipient. It's a great way to strengthen the impact of your gift!**

**RSVP:**

**EMAIL this form to [lacla@jbws.org](mailto:lacla@jbws.org)**

**OR**

**REGISTER ONLINE at [jbws.org](http://jbws.org)**

**OR**

**MAIL this form to**

**JBWS Special Events - P.O. Box 1437 Morristown, NJ 07962**

For information, please contact Lynne Acla at [lacla@jbws.org](mailto:lacla@jbws.org).

**THANK YOU FOR YOUR PARTICIPATION!  
WE VALUE YOUR SUPPORT AND APPRECIATE YOUR COMMITMENT TO JBWS.**

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