20th Anniversary Sponsor Payment Form



I would like my sponsorship to support:	Check corresponding sponsor level:	
ANNIVERSARY EVENTS	COMMEMORATION SPONSORSHI	PS
20th Annual Remembrance Symposium	Resilience Sponsor:	\$50,000*
Always Remember Gala	Leadership Sponsor:	\$35,000*
☐ Voices of Reflection Art Exhibit	Legacy Sponsor:	\$25,000
I would like my donation to support:	☐ Presenting Sponsor:	\$10,000
ANNIVERSARY PROGRAMS	Premier Sponsor:	\$5,000
Reflections on the 20th Anniversary Video	☐ Tribute Sponsor:	\$3,500
☐ Pathways to Resilience Programs and Support Services	☐ Benefactor Sponsor:	\$2,500
9/11 Living Memorial Honoring Survivors and Responders	Patron Sponsor:	\$1,000
Wolfgruber Digital Resource Library	* Includes recognition on all VOICES programs	
☐ Please direct my contribution to where most needed		
I would like to donate: \$		
PAYMENT FORM	PAYMENT METHODS	
Sponsor Name:	Check enclosed: Payable to Voices Center for Resilience	
Contact Name:	Credit Card: Fill out info below	
Address: Street	Credit Card Car	d Number
CityState Zip	Expiration Date CVC	:
Phone Email	Signature	·

Mail checks to Voices Center for Resilience: 80 Main Street, New Canaan, CT 06840 • Credit card payment may be made on our website: VoicesCenter.org