

Sponsorship Form 2024



Contact Information:

Sponsor Name: _____

Contact: _____ Phone: _____

Contact Email: _____

Address: _____

Payment by Check: I have enclosed a check made payable to **Kona Pride Inc.**

Prefer to make a payment by Credit Card
Also available online www.konapride.com/sponsor



Name on Card: _____

Credit Card Number: _____

Expiration Date: _____ CVV: _____ Billing Zip Code: _____

Authorization Signature: _____

Sponsorship Package:

___ PRESENTING	\$10000
___ PLATINUM	\$7500
___ GOLD	\$5000
___ SILVER	\$3000
___ BRONZE	\$1500
___ RAINBOW	\$500

Once we receive your form, we will contact you to discuss your participation. Please e-mail your high-resolution color and black-and-white logos to konaprideinc@gmail.com