

Yes, I/we want to help sponsor the

National Veterans Legal Services Program 2021 Virtual Annual Benefit

November 18, 2021 - *Defending Veterans Rights Since 1981*

Diamond Sponsor ~ \$50,000

- Prominent recognition as principal sponsor in virtual event publications and promotional materials
- Sponsorship featured in NVLSP newsletter and social media
- Prominent placement of logo with link on NVLSP website
- Option to submit a testimonial ad to air during virtual event

Gold Sponsor ~ \$15,000

- Recognized in virtual event publications and promotional materials
- Sponsorship recognized in NVLSP social media
- Placement of logo with link on NVLSP website
- Option to submit a testimonial ad to air during virtual event

Bronze Sponsor ~ \$5,000

- Mentioned in virtual event publications, social media, materials and website
- Option to submit a testimonial ad to air during virtual event

Platinum Sponsor ~ \$30,000

- Recognition as leading sponsor in virtual event publications and promotional materials
- Sponsorship featured in NVLSP social media
- Placement of logo with link on NVLSP website
- Option to submit a testimonial ad to air during virtual event

Silver Sponsor ~ \$10,000

- Named in virtual event publications, social media, materials
- Placement of logo on NVLSP website
- Option to submit a testimonial ad to air during virtual event

Copper Sponsor ~ \$2,500

- Mentioned in virtual event publications, materials and website
- Option to submit a testimonial ad to air during virtual event

Donor ~ Contributions up to \$2,499

- Mentioned in virtual event publications
- I/we would like to make a contribution of \$ _____

Organization/Corporate Name (As it should appear in all publicity and promotional materials): _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Enclosed/in the mail is my/our check made out to National Veterans Legal Services Program.

I/we prefer to make my/our contribution by credit card: MasterCard Visa American Express Discover

Card Number: _____ Expiration Date: _____

Name on Card: _____ CSC Code: _____

Billing address (If different than above): _____

Signature: _____

For more information contact Ana Reyes ~ 202.621.5690 ~ 202.328.0063 (fax) ~ ana_reyes@nvlsp.org
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