

2021 Bluebird Run for Brookie B

| <i>Sponsorship Opportunities</i> | Supporter \$250 | Advocate \$500 | Luminary \$1,000 | Sustaining \$3,000 |
|--|---------------------------|--------------------------|----------------------------|------------------------------|
| Your Logo on BluebirdRun.com + Link to Your Site | | | | |
| Your Logo on NAMI-Tallahassee Website | | | | |
| Your Logo on Social Media Sites | | | | |
| Your Logo on Event Display and Mile Markers | | | | |
| Your Promotional Materials in Race Packets | | | | |
| Your space for table/display at Event | | | | |
| Your Logo on Bluebird Run Tech T-shirts* | | | | |
| Your Logo on Printed Promotional Materials | | | | |
| Your Name Announced at Start and Awards | | | | |
| Your Name in All Radio Ads | | | | |
| Event Registrations for Your Family and Friends | 2 | 5 | 10 | 15 |
| Tech T-shirts* for Your Family and Friends | 2 | 5 | 10 | 15 |

**ultra-light, high quality, moisture-wicking shirts; adult sizes only*

Your Sponsorship Form

Bluebird Run for Brookie B Sponsorship 2021

Supporter **Advocate** **Luminary** **Sustaining**
\$250 \$500 \$1,000 \$3,000

Check (X) the box of Your Sponsorship Preference

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|

Sponsor Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Email: _____

Sponsorship Recognition:

To remain anonymous, please check (X) this box:

Otherwise, please email a jpeg of your logo to: contact@BluebirdRun.com



Payment Method:

Mail check with this Sponsorship Form to:

NAMI Tallahassee

P O Box 14842

Tallahassee, FL 32317

Questions?

Please send an email to: contact@BluebirdRun.com

Or call Bill Bowers at 850-228-1263

