



OPPORTUNITIES TO BE RECOGNIZED AS A DSI TERRE HAUTE SUPPORTER
THESE DONATION LEVELS WILL BE RECOGNIZED AT OUR
DSI TERRE HAUTE 8th Annual BUDDY WALK® ON April 27th, 2024 at Memorial Stadium

Title Sponsor **\$2,500**

- Prominent logo/name placement on Walk T-shirts
- Recognition at opening/closing ceremonies
- Company logo and link on DSI social media
- Company logo and link sent out to over 1,000 subscribers on DSI's E-News
- Company logo/name featured on signage at Walk
- Ten complimentary T-shirts for corporate team walkers

Corporate Sponsor **\$1,000**

- Logo/name placement on Walk T-shirts
- Company logo on DSI social media
- Company logo sent out to over 1,000 subscribers on DSI's E-News
- Company logo featured on signage at Walk
- Five complimentary T-shirts for corporate team walkers

Community Sponsor **\$500**

- Company name on Walk T-shirts
- Company name on DSI social media
- Company name sent out to over 1,000 subscribers on DSI's E-News
- Company name featured on signage at Walk
- Two complimentary T-shirts for corporate team walkers

Awareness Sponsor **\$250**

- Company name on DSI social media
- Company name sent out to over 1,000 subscribers on DSI's E-News
- Company name featured on signage at Walk

Friend of DSI Terre Haute

- Company name on DSI social media **\$100**

Special Notes

- Contributions benefit programming and support of Down Syndrome Indiana Terre Haute.
- Down Syndrome Indiana is a 501(c)(3) tax-exempt organization.
All gifts are tax-deductible to the extent permitted by law. *Federal Tax ID #80-0732286*
- Signed commitment forms must be received by March 25, 2024 to be included in all Terre Haute Buddy Walk® promotional materials by mail or email: Dixie@dsindiana.org *CHECKS CAN BE SENT AT A LATER DATE
- Please send attached confirmation form to:
Down Syndrome Indiana Attn: DSI Terre Haute
615 N. Alabama St., Suite 205, Indianapolis, IN 46204
or fax the completed form to 317-925-7619, or scan and email the completed form to: dixie@dsindiana.org.

I WOULD LIKE TO SUPPORT DSI TERRE HAUTE!

Name _____

Company Name _____

Email _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Relationship to an individual with Down syndrome: (Please circle all that apply)

Parent	Professional	Grandparent	Educator	Self Advocate
Sibling	No Relation	Loved one of an individual who is now deceased	Other	

I would like to make the following contribution:

___ \$2,500 ___ \$1,000 ___ \$500 ___ \$ 250 ___ \$100

Other (Please write in amount): _____

Please place a check mark next to the method of payment below:

___ Check (Please make check payable to Down Syndrome Indiana
and mail to: 615 N. Alabama St., Suite 205, Indianapolis, IN. 46204)

___ I would like to support DSI Terre Haute and be recognized at Buddy Walk but will send my check at a later date
Check will be sent on: _____ (Checks need to be received by 12/31/2024)

___ Charge Card: Please fill in additional information:

___ Visa ___ MasterCard ___ Other, please write card type here: _____

Account #: _____ Expiration Date: _____ Security Code: _____

Authorized Signature: _____

Questions please contact: Dixie Russell, Regional Buddy Walk Coordinator for Terre Haute
Dixie@dsindiana.org or 812-899-0641