



2012 Date with a Star: Sponsorship Form

Sponsorship Level _____

Sponsorship Amount \$ _____

Contact Information:

Note: Sponsorships are not eligible for tax receipts. They can be used as advertising expenses.

Name /Company name _____

Mailing Address _____

Postal Code _____

Phone _____

Email _____

Method of payment:

Total Payment: \$ _____ Cheque Cash Credit Card

Credit card number _____

Expiry Date _____ / _____

Signature _____

Please send this completed form and method of payment to:

Learning Disabilities Association of Manitoba - 617 Erin Street, Wpg, MB R3G 2W1
P: (204) 774-1821 F: (204) 788-4090



Idam·Learning Disabilities Association of Manitoba

The right to learn, the power to achieve

www.LDAManitoba.org

.A.