



CCHH: Where Hope and Healing Meet

*Educate... Advocate... Donate*

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**SPONSORSHIP LEVELS**

Gold - \$3,500       Silver - \$2,500       Bronze - \$1,500       Other - \_\_\_\_\_

**PAYMENT OPTIONS**

Invoice       Check (make payable to CCHH)       Credit Card\*

\*Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

[To submit this form, please email to [cwilson@hopeandhealingga.org](mailto:cwilson@hopeandhealingga.org), fax to 770.532.7111, or mail to P.O. Box 907401, Gainesville, GA 30501.]

For any questions, contact Cindy Wilson [Director of Development & Finance] at 770.532.6530 x1032.

***Thank you for supporting the Children's Center for Hope & Healing!***