



Broadcast Sponsorship Form

This form may be faxed (709-579-5099), mailed (P.O. Box 13006, Stn."A", St. John's, NL A1B 3V8) or emailed to (info@elim.nf.ca)

Sponsor Information

*Please indicate correct address for tax receipt purposes

Name: _____

Address: _____

Town: _____

Postal Code: _____

Province: _____

Telephone: _____

Fax: _____

Email: _____

Sponsor Details

☐ \$943.85 (Full Broadcast)

For those sponsoring a Full Broadcast there may be some special time or occasion that may be most applicable/desirable. If so, please indicate:_____.

☐ Other amount: _____

*Donations may be made payable to 'The Old, Old Story'. Payment plans are available by way of post-dated cheques, automatic credit card payments, or email transferred to info@elim.nf.ca.

Period: ☐ Multi-year:_____year ☐ One-time Commitment ☐ Other: _____

Recognition

Would you like for us to acknowledge your full broadcast sponsorship by way of a personal reference ex: In memory of loved ones, in honor of a person(s), or some other reference to reflect your commitment/donation?

☐ Yes (if yes, you will be contacted to determine the actual content)

☐ No

Donor Signature: _____

Date: _____