



SPONSORSHIP FORM
Establishing Roots: Annual Fundraising Reception
October 9, 2024

Sponsor's Name

Address

City

State

Zip

Name of contact person

Phone

Email: _____

Website: _____

Sponsorship amount: \$ _____

Payment can be [made online](#) or using this form.

Payment method: (check one) Check Credit Card

Checks can be made payable to: Family & Youth Initiative

Credit Card: MasterCard Visa Amex Discover

Card number: _____ Exp. Date: _____ Security code: _____

Authorizing signature: _____ Date: _____

PLEASE RETURN FORM AND PAYMENT TO:

Family & Youth Initiative
853 New Jersey Avenue, SE
Suite 200
Washington, DC 20003

DCFYI Tax ID#: 38-3828204

DEADLINE: September 18, 2024 to be included in event materials