



SPONSORSHIP COMMITMENT FORM

Corporate Individual: _____ Date: _____

Company Name: _____

Contact Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

- Please print all names legibly and exactly as they appear in all publications •
- Email company logo to: tampafiremuseum@gmail.com •

Sponsorship Category:

High Rollers Sponsor \$5,000

Bronze Sponsor \$500

Gold Sponsor \$2,500

Table Sponsor \$250

Silver Sponsor \$1,000

Billing Information:

Check Enclosed: \$ _____ (Make checks payable to Tampa Fire Fighters Museum)

Credit Card: (VISA) (MasterCard) \$ _____

Credit Card Number: _____ Exp. Date: _____

Billing Address: _____

Sponsor signature: _____

Thank you for your support

Please mail this form to: Tampa Firefighters Museum, 720 E Zack Street, Tampa 33602

Or you can scan and email to TampaFireMuseum@gmail.com