



## DONATION FORM

Business Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## SPONSORSHIP

I would like to be a Race Sponsor:  
 **Grand Master Jedi** - \$5,000  
 **Jedi Master** - \$2,500  
 **Jedi Knight** - \$1,000  
 **Padawan** - \$500  
 **Youngling** - \$250  
 **Jawa Juice Station**

Total Donation Amount: \_\_\_\_\_

## PAYMENT OPTIONS

Please send me an invoice.  
 My check is enclosed.  
 Please charge my credit card.

*I understand that a credit card convenience fee of 3% will be added to my total payment.*

Name on Card: \_\_\_\_\_  
 Acct. #: \_\_\_\_\_  
 Card Type: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_  
 Billing Zip Code: \_\_\_\_\_  
 Signature: \_\_\_\_\_

## PRIZE DONATIONS/IN-KIND

Donor's Estimated Value: \_\_\_\_\_

Name of donated item(s): \_\_\_\_\_

Description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- Item accompanies donation form.
- To be delivered to Lawndale Baptist Church
- To be picked up by \_\_\_\_\_ (date).

Signature of Donor: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit a copy of this form to [Cindy@RPCounseling.org](mailto:Cindy@RPCounseling.org) for marketing purposes. Please submit the original form along with payment to: **Lawndale Baptist Church · Attn: Jimmy Jackson · 3505 Lawndale Drive · Greensboro NC · 27408** Email: [jjackson@lawndalebaptist.org](mailto:jjackson@lawndalebaptist.org) · Tax ID#: 56-0732040

<https://maythecourserace.com>