

**Sponsorship Request for Donation:**

**Print/Fill out and Fax this back to us: at 910-424-0028**

**Name of Organization:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Tell us about the event:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Request- Check below:**

**Attend event-----      Ask Dr. Nelson to speak\_-----**

**Guest speaker -----      Ask Dr. Nelson to attend \_\_\_\_\_**

**Donation funds-----      Ask Dr. Nelson to participate-----**

**Donate prizes-----      Ask Dr. Nelson to bring Mascots-----**

**Contact Person:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_