



North Township
FALLEN HEROES MEMORIAL

**North Township Fallen Heroes Memorial
SPONSORSHIP AGREEMENT**

SPONSORSHIP AGREEMENT, made this ____ day of _____, ____ by and between the undersigned "Sponsor," _____ and the Wicker Park Memorial Fund ("WPMF") as the undersigned recipient of the funds to be donated, WPMF having an address 8554 Indianapolis Boulevard, Highland, IN 46322.

Sponsor pledges to donate and WPMF accepts Sponsor's donation in cash the total sum set forth below.

Total Sponsorship Amount: \$ _____

All contributions will be formally acknowledged. All checks should be made payable and mailed as indicated below. If you have questions, please contact the park office at (219) 838-3420.

Contributions payable and mailed to:

Wicker Park Memorial Fund
Attn: Renee Ramos, Fallen Heroes Memorial
8554 Indianapolis Boulevard
Highland, IN 46322

SPONSOR INFORMATION

Name/Company: _____

Signature: _____

Print Name: _____

Address: _____

NONPROFIT RECIPIENT ORGANIZATION

Name/Company: _____

Signature: _____

Print Name: _____

Title: _____

Phone: _____