

Sponsorship Opportunities

Thank you for supporting Odyssey House. Proceeds from Run for Your Life help to maintain our programs and provide a safe, supportive residential community focusing on drug-free living, family reunification, and educational and vocational training.

Silver Sponsor, from \$1,000 to \$4,999

- Participation in special race-day recognition ceremony
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge

Gold Sponsor, from \$5,000 to \$14,999

- Participation in special race-day recognition ceremony
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast

Platinum Sponsor, from \$15,000 to \$24,999

- Participation in special race-day recognition ceremony
- Inclusion in 10th Anniversary Run for Your Life Hall of Fame on Odyssey House website
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast

Titanium Sponsor, \$25,000 and above

- Participation in special race-day recognition ceremony
- Inclusion in 10th Anniversary Run for Your Life Hall of Fame on Odyssey House website
- Prominent placement of company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast



Sponsorship Agreement

& Recovery V	ree to provide sponsorship funding for the Odyssey House 10th Annual Run for Your Life 5K Run <i>Valk</i> on September 24, 2016 in the amount indicated below in exchange for the sponsorship benefits the contribution level:
Titanium	Sponsor (\$25,000)
Platinum	Sponsor (\$10,000)
Gold Spo	onsor (\$5,000)
Silver (\$	1,000)
We m	ust receive a completed agreement by August 12th to put your logo on the banner
We give Odyss Run for Your	sey House permission to use our name and/or logo for all promotional activities associated with Life 2016.
Contact Name	<u>. </u>
Гitle ———	
Organization/	Company
Street Address	3
City———	State ZIP
Phone ———	E-mail
Payment:	Check enclosed (please make checks payable to Odyssey Foundation) Please bill my: □ VISA □ MasterCard □ American Express □ Discover Name on card
	Card number Exp. date/ Sec. Code
	Signature
	Please invoice me.
Plo	

Mail or fax this agreement to: Carolyn Abrams

Odyssey House 120 Wall Street, New York, NY 10005

Fax (212) 361-1666