

## Politz Panoply Sponsorship Form

Company Name:	
Address:	
City:	_State: Zip:
Phone:	_Fax:
Representative:	
E:Mail:	
Signature:	

## **Please Check One:**

	Mensa	\$5,000
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- □ Dean \$2,500
- □ Principal \$1,000
- □ Quizmaster \$600
- □ Jeopardy Junkie \$360
- □ Puzzle Manic \$180
- □ I am not able to attend the event, but have enclosed a donation.

Payment in full is requested to secure your sponsorship. If this is not possible, a minimum 50% is required at the time of commitment, with the balance to be paid by January 15, 2015.

Please charge my:  $\Box$ Visa  $\Box$ MC  $\Box$ AMEX

Account # \_\_\_\_\_ Exp. Date \_\_/\_/\_\_

Cardholder's Signature: \_\_\_\_\_

## Send or fax your completed form to:

Politz Panoply 720 Cooper Landing Road • Cherry Hill, NJ 08002 Phone: 856-667-1013 • Fax: 856-667-2010 www.politz.org / politzpanoply@gmail.com