



Nostalgia Days

Cruizin' Zion Illinois Since 1987

Sponsor Form

Sponsor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Pledge Information

We would like to Sponsor a total of \$_____ For the _____ Package:

I (we) plan to make this contribution in the form of:

___ cash ___ check ___ credit card ___ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Nostalgia Days, Inc
PO Box 486
Zion, IL 60099