



USTA BENEFACTOR FOUNDATION

2017 BENEFACTOR and/or SCHOLARSHIP DONATIONS

Name _____ Home Phone _____ Cell Phone _____
 Address _____ City _____ State _____ Zip _____
 Email _____

2017 BENEFACTOR MEMBERSHIP BENEFITS*

*Donations made by credit card will be reduced by the amount of credit card processing fees.

<input type="checkbox"/> Medalist Club (\$100 - \$249) <ul style="list-style-type: none"> Benefactor recognition in National Program if rec'd by May 1st Benefactor preferred seating for the entire week of the National Championships Recognition at National Championships An official national t-shirt – must be picked up at Nationals. T-shirt size _____ (Please specify size or you will receive an adult large) <input type="checkbox"/> Bronze Club (\$250 - \$499) <ul style="list-style-type: none"> All of the above, plus; 2 x 4 recognition banner prominently displayed during the National Championships T-shirt size _____ (Please specify size or you will receive an adult large) <input type="checkbox"/> Silver Club (\$500 - \$999) <ul style="list-style-type: none"> All of the above, plus; 3 x 6 recognition banner prominently displayed during the National Championships T-shirt size _____ (Please specify size or you will receive an adult large) 	<input type="checkbox"/> Gold Club (\$1,000 - \$2,499) <ul style="list-style-type: none"> All of the above, plus; One year free USTA Membership of choice T-shirt size _____ (Please specify size or you will receive an adult large) <input type="checkbox"/> Platinum Sponsor (\$2,500 & up) <ul style="list-style-type: none"> All of the above, plus; 4 x 8 recognition banner prominently displayed during the National Championships Parking passes T-shirt size _____ (Please specify size or you will receive an adult large) <input type="checkbox"/> Corporate/Commercial sponsorship opportunities are available. Please contact USTA at 303-349-7267 <hr/> <input type="checkbox"/> YES, we will reuse our benefactor banner from previous year(s), thereby further reducing the cost to this program.
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PLEASE create a new banner using the attached information

My gift is to be used as follows:

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|--|--|---|
| <input type="checkbox"/> 2018 World Championships, Kissimmee, FL | <input type="checkbox"/> Marketing/Promotions Fund | <input type="checkbox"/> U.S. World Tour (even yrs)/IC |
| <input type="checkbox"/> Coaches/Judges Training Development | <input type="checkbox"/> Sharon Campbell Memorial Fund Grassroots/Recreation | <input type="checkbox"/> Unrestricted |
| <input type="checkbox"/> Growth & Development/Outreach/USTAR | <input type="checkbox"/> U.S.T.A. Website | <input type="checkbox"/> Other _____ (e.g. Nat'l Conventions/iTwirl...) |

USTA Scholarship Awards

Again this year, the USTA Benefactor Foundation will award hundreds of Scholarship Awards, based on donations received, to athletes who are competing in the semi-final and final rounds of their individual events and members of eligible first place national groups. These awards are made possible by the generous support of parents, athletes, coaches, judges, groups, councils, corporate sponsors and former bond winners.

Please consider donating an award to honor our athletes!

(* All awards have a \$3 processing fee included in the pricing below.)

<input type="checkbox"/> Scholarship Award at \$28 _____	<input type="checkbox"/> Primary Semi-final Award \$53, Event _____
_____ Number x \$28	<input type="checkbox"/> Juvenile Semi-final Award \$53, Event _____
_____ Total Amount	<input type="checkbox"/> Junior Semi-final Award \$53, Event _____
Total Scholarship Donations _____	<input type="checkbox"/> Senior Semi-final Award \$53, Event _____
Total Benefactor Challenge Donations _____	<input type="checkbox"/> Adult Semi-final Award \$53, Event _____
TOTAL OF ALL DONATIONS _____	<input type="checkbox"/> National Collegiate Event \$53, Event _____

Note: Scholarships will be designated to an event on a first come basis. Donors will receive two preferred seating badges per award for the National Championships and will be recognized in the national championship program if received by May 1st.

Method of Giving: Check (Make checks payable to U.S. Twirling Association) Credit Card Visa MC Amex Disc

Credit Card # _____ Exp. Date _____ Credit Card Security Code _____

Name of Cardholder

Signature of Cardholder

Billing Address _____ City _____ State _____ Zip _____

Mail your donation to: USTA Benefactor Foundation ♦ 1608 Wortell Drive, Lincoln, CA 95648

For more information email Benefactors@ustwirling.com