



Metropolitan Organization to Counter Sexual Assault

**Sponsorship Form
Johnson County Fall forum
Friday, October 20, 2017**

Name of sponsor as it should appear in publications: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

2017 Sponsorship Levels

- __ \$5,000 Champion
- __ \$2,500 Advocate
- __ \$1,500 Supporter
- __ \$1,000 Helping Hand
- __ \$500 Table Host
- __ \$55 Individual Ticket

Purchase a sponsorship via check: return this form and your check (payable to MOCSA) to:
MOCSA
Attn: Johnson County Fall Forum
3100 Broadway, Suite 400
Kansas City, MO 64111

If you will be sending a check at a later date,
please indicate when your check will be mailed: _____

Purchase a sponsorship online: www.mocsa.org > News & Events > Fall Forum

Purchase a sponsorship via credit card payment:

Please charge my: (____) Visa (____) MasterCard
Card # _____
CVC# _____ Expiration Date: _____
Card Holder Name/Signature: _____

If you have any questions or would like more information when making your Sponsorship Level selection,
please contact Sandra Williams at (816) 285-1341 or swilliams@mocsa.org.

I cannot attend, but I would like to make a donation to MOCSA in the amount of \$ _____
Please charge my: (____) Visa (____) MasterCard
Card # _____
CVC# _____ Expiration Date: _____
Card Holder Name/Signature: _____

3100 Broadway, Suite 400, Kansas City, MO 64111
Business (816) 931-4527 Fax (816) 931-4532
www.mocsa.org