



Halifax Community College and HCC Foundation Inc. Sponsorship Commitment Form

Contact Name: _____
Organization (if applicable): _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
Email: _____

You may sponsor as many events as you would like:

- I would like to serve as a _____ sponsor for the following event:
_____.
- I would like to serve as a _____ sponsor for the following event:
_____.
- I would like to serve as a _____ sponsor for the following event:
_____.
- I would like to serve as a _____ sponsor for the following event:
_____.
- I would like to serve as a _____ sponsor for the following event:
_____.

Enclosed is my check for \$_____.

By signing below, I agree to the terms outlined in this commitment form. I also agree to email the logo and background information about the organization or individual sponsoring the event(s) to hccia@halifaxcc.edu.

Sponsor's Printed Name *Sponsor's Signature* *Date*

Printed Name of HCC Foundation Official *Signature of HCC Foundation Official* *Date*

Please make your check payable to "HCC Foundation Inc." and mail it, along with this completed form, to **Halifax Community College Foundation Inc., 100 College Drive, P.O. Drawer 809, Weldon, NC 27890**. Thank you for your support!