

# heart + sole



benefitting  
Children's Hospital of Georgia

Saturday, March 4, 2023

Heart and Sole, Inc. Volunteer

PAYMENT (Check One)	AMOUNT
<input type="checkbox"/> Credit Card	<input type="checkbox"/> Sponsor _____
<input type="checkbox"/> Check # _____	
<input type="checkbox"/> Cash	
Date Paid _____	

### Sponsorship Levels:

- Diamond Hearts** . . \$6,000 . . . . Sponsor receives business logo on finish line banner, Heart and Sole, Inc. t-shirts, Heart and Sole, Inc. website and on all Heart and Sole, Inc. printed materials; event program recognition with six race entry fees.  
*\*Limited Availability*
- Platinum Hearts** . . \$3,000 . . . . Sponsor receives business logo on Heart and Sole, Inc. t-shirts, Heart and Sole, Inc. website and on all Heart and Sole, Inc. printed materials; event program recognition with four race entry fees.
- Gold Hearts** . . . . . \$1,500 . . . . . Sponsor receives business logo on Heart and Sole, Inc. t-shirts, Heart and Sole, Inc. website and on all Heart and Sole, Inc. printed materials; event program recognition with two race entry fees.
- Silver Hearts** . . . . . \$1,000 . . . . . Sponsor receives business logo on Heart and Sole, Inc. t-shirts, and Heart and Sole, Inc. website; event program recognition with two race entry fees.
- Bronze Hearts** . . . . \$500 . . . . . Sponsor receives business name on Heart and Sole, Inc. event program, Heart and Sole, Inc. t-shirts, and Heart and Sole, Inc. website; event program recognition with two race entries.
- Other** . . . . \$ \_\_\_\_\_ . . . . Sponsor receives business name on Heart and Sole, Inc. website.

### PLEASE COMPLETE ALL OF THE FOLLOWING:

Company \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_ Title \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
Special Instructions \_\_\_\_\_  
  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
  
\*\*CREDIT CARD  VISA  MC  AMEX  DISCOVER  
Card Number \_\_\_\_\_ CID# \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Name as it appears on card \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Address \_\_\_\_\_

**Please mail form and check payable to:**  
Heart and Sole, Inc. • P.O. Box 10092 • Augusta, GA 30903-0092  
or email form to: [heartandsole.augustaga@hotmail.com](mailto:heartandsole.augustaga@hotmail.com)

For more information on individual race entries, please visit [www.heartandsoleinc.org](http://www.heartandsoleinc.org).