



## Sponsorship Commitment Form

**My affiliation with HACC, Central Pennsylvania's Community College (please select all that apply):**

Alumnus   
  Board Member   
  Donor   
  Employee   
  Parent   
  Student  
 Prefix:   
  Mr.   
  Mrs.   
  Ms.   
  Dr.   
  Other \_\_\_\_\_

**Please select the events and sponsorship levels you wish to sponsor. For sponsorship descriptions, please go to [www.hacc.edu/sponsorships](http://www.hacc.edu/sponsorships)**

<b>Name:</b>	
<b>Organization:</b>	
<b>Address:</b>	
<b>Phone:</b>	
<b>Email:</b>	

**I wish to sponsor the following:**

<b>Event Name:</b>	
<b>Event Date:</b>	
<b>Sponsorship Level:</b>	
<b>Sponsorship Amount:</b>	

**Please select the campus location(s) or unit you are sponsoring:**

Collegewide   
  Harrisburg   
  Lebanon   
  Virtual Learning  
 Gettysburg   
  Lancaster   
  York

**Please indicate how your sponsorship should be listed:**

Would you like your sponsorship to be anonymous?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered "no," please indicate how your organization should be listed below:		
Would you like your sponsorship to be in honor or memory of someone?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered "yes," please indicate how your sponsorship should be listed below:		

***Please submit your company logo to [sponsorships@hacc.edu](mailto:sponsorships@hacc.edu) by the event print deadlines. Please visit [www.hacc.edu/sponsorships](http://www.hacc.edu/sponsorships) for the event print and payment deadlines.***

**Contribution Methods:**

- **Check** – Please make your check payable to **HACC Foundation** and mail this form and the check to **HACC Foundation, One HACC Drive, Harrisburg, PA 17110.**
- **Credit Card** – If you would like to pay by credit card, please go to the HACC Foundation's secure giving site <http://www.hacc.edu/givenow>. Under "Choose your designation," please select "Other fund" from the list and type the event name and your sponsorship level in the space provided.

By signing this form, you agree to the terms and payment of the sponsorship you selected. If you have any questions, please contact us at [sponsorships@hacc.edu](mailto:sponsorships@hacc.edu). Thank you for your support!

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_