SPONSORSHIP OPPORTUNITIES

| PRESENTING SPONSOR SOLD \$1 | 0,010 |
|--|------------------------------|
| PLATINUM SPONSOR: Prominent logo recognition on website, media, and all marketing materials Logo recognition on social media Prominent logo on back of event T-shirt 2 sponsored email blasts to participants 10 complimentary registrations for Power in Pink Addition of materials provided in participant bags (provided by | \$5,000 sponsor) |
| TITANIUM SPONSOR: Prominent logo recognition on website, media, and all marketing materials Logo recognition on social media Logo on back of event T-shirt 5 complimentary registrations for Power in Pink Addition of materials provided in participant bags (provided by | \$2,500 (sponsor) |
| GOLD SPONSOR: Logo recognition on website Recognition on social media Logo on the back of event T-shirt 5 complimentary registrations for Power in Pink | \$1,000 |
| SILVER SPONSOR: Name recognition on website Recognition on social media Name on back of event T-shirt 2 complimentary registrations for Power in Pink | \$500 |
| BRONZE SPONSOR: Name on back of event T-shirt 2 complimentary registrations for Power in Pink | \$250 |

2 complimentary registrations for Power in Pink

SPONSORSHIP ORDER FORM

| Sponsor | ships | Payment Method | | | | |
|----------------------------------|----------------|--------------------------------------|-------------------------|--|--|--|
| Platinum | \$5,000 | Check | Credit Card | | | |
| 🗆 Titanium | \$2,500 | | | | | |
| □ Gold | \$1,000 | Card #: | | | | |
| □ Silver | \$500 | | | | | |
| Bronze | \$250 | Exp. Date: | V-Code: | | | |
| | Conta | act informati | on | | | |
| Name of Compa Contact Person: | ny (if applica | ble) | | | | |
| Address: | | | | | | |
| Clty, State & Are | a Code | | | | | |
| Phone | | E-mail: | | | | |
| For quest | | re information ca il Mandy@bcfcf. | all 863.370.1927 org | | | |

BREAST CANCER FOUNDATION OF CENTRAL FLORIDA

P.O. Box 2508 Lakeland, FL 33806





Helping cover the cost of life for families facing breast cancer

OCTOBER 1-31, 2020

A virtual marathon challenge to exercise separately, while uniting together to support BCFCF



Send us your love on social media: #BCFCFPowerInPink #BCFCF262Challenge

PROCEEDS BENEFIT:

BREAST CANCER FOUNDATION OF CENTRAL FLORIDA





The Breast Cancer Foundation of Central Florida is challenging YOU to join the **POWer in Pink** -26.2 Virtual Month-Long Marathon Challenge! Together we can help breast cancer patients pack a POWerful PUNCH to situational poverty, stemming from a breast cancer diagnosis!

Run/walk, bike, swim, or even skate/rollerblade! You choose HOW and WHERE you want to do the miles while also following the latest CDC local and state guidelines regarding Covid-19. All registered participants will receive event specific swag; including a T-shirt, downloadable print-at-home bib and log sheet, participant medal AND a \$5 off \$50 or \$10 off \$100 coupon to redeem at ANY FITniche Running Store location.



BREAST CANCER FOUNDATION

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Send us your love on social media: #BCFCFPowerInPink #BCFCF262Challenge

JOIN THE EVENT ON FACEBOOK WWW.FACEBOOK.COM/GROUPS/2020PIP





PRE-REGISTER TODAY FOR THE **POWER IN PINK** 26.2 - VIRTUAL MARATHON CHALLENGE

OCTOBER 1-31, 2020

Register online at RUNSIGNUP.COM

or fill out this registration form and mail or fax to:

Breast Cancer Foundation of Central Florida P.O. Box 2508 | Lakeland, FL 33806 ph: 863.370.1927 | fx: 417.862.3830 | bcfcf.org

| \$30 Pre-Registration / \$35 Month of Registration (Pre-registration starts August 21st and ends September 30th/ Month of registration ends October 16th) | | | | | | 5 | | | |
|---|-------------------|------------|------------|-------------|------------|--------|--------|-------|--|
| I have enclosed a check payable to: Breast Cance I am not participating, but would like to enclose | a donati | on of: \$ | | | | | | | |
| PLEASE PRINT: Credit card donatic | ons accepte | d online a | t: www.bcf | cf.org/dona | ate-online | | | Ū. | |
| 🗌 Individual | | | | | | | | | |
| Name: | | | | | | RU | NSIGNU | P.COM | |
| Address: | | Cit | у: | | | State: | Zip: _ | | |
| Phone: | SHIRT S Adult: | | □s | ПМ | | | | 🗌 3XL | |
| E-mail: | Youth: | □xs | S | M | | | | | |

BCFCF, Watson Clinic Foundation, and FITniche Release & Waiver

(must be signed by ALL that participate in virtual marathon)

I know that exercising is a potentially hazardous activity. I understand that I should not enter and exercise unless I am medically able and properly trained. I do, by my signature below, certify that I am in proper physical condition and in good health. I understand that if I exercise on a bicycle or skates/rollerblades, I must wear a helmet. I agree to wear all appropriate equipment, including a helmet, always, while cycling or skating/rollerblading in this event. I also understand that participants under eighteen years of age must have: (1) a written consent from a parent or legal guardian; (2) a signature on a Waiver; (3) be accompanied by an adult at this event; and (4) be able to run, walk/hike, bike, swim, or skate/rollerblade by their own power.

I assume all risk associated with exercising in this event, including but not limited to, falls, contact with other participants and/or pedestrians, weather, traffic, conditions of the road and/or riding/biking/skating/rollerblading surfaces or water. All these risks are known and appreciated by me. Knowing these facts and in consideration of your acceptance of my entry, I do, for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue, waive, release, and discharge any and all sponsors, including but not limited to Breast Cancer Foundation of Central Florida, Watson Clinic Foundation, and FITniche stores, their agents, employees, assigns, directors, or anyone acting for or on their behalf, from any and all claims or liability.



Parent or Legal Guardian if under 18: _____

Child's Name:

Date: