

**THE CARING COMMUNITY FOUNDATION, INC.  
SPONSORSHIP/MARKETING AGREEMENT**

To be listed as a sponsor on event materials, please return before **March 13, 2015**.

**Company Name:** \_\_\_\_\_

**Sponsorship Contribution Amount:** \_\_\_\_\_

**Event:** The Caring Community Foundation "Breakfast in Bed Race"

**Event Date:** April 18<sup>th</sup> 2015

**Event Location:** Academy Street ~ Downtown Cary, NC

**Contribution to be fully received by:** March 31, 2015

**Contribution Payment Terms:** \_\_\_\_\_

**Send Check To:** The Caring Community Foundation, Inc.  
Attn: Adel Fahmy  
P.O. Box 1364  
Cary, NC 27512

**Purpose:** The purpose of the Caring Community Foundation, Breakfast in Bed Race is to raise awareness and funds to allow the Foundation to continue its mission of providing financial assistance to cancer patients in need in the Triangle, NC area. The purpose of the event is not to endorse or promote any product or service of Sponsor or of any third party.

- Check should be made payable to the Caring Community Foundation, Inc. ("CCF")
- All printed materials that include the CCF logo must be approved by CCF
- The entire liability of CCF, and sponsors' exclusive remedy for damages from any cause related to or arising out of this Agreement, will not exceed the refund of monies actually paid to CCF by sponsor and not yet expended by CCF.

**Contact Information:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

*My signature indicates authorization to make this commitment on behalf of my company.*

**Thank you for your support of the Caring Community Foundation.**