

SPONSORSHIP FORM



REGISTRATION FORM

Organization Name

Date :

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Sponsorship Type

Gourmet
(\$25,000)

Foodie
(\$10,000)

Savory
(\$5,000)

Flavor
(\$2,500)

Contact Name:

PERSONAL INFORMATION

First and Last :
Name

Billing Address :

City and State :

Zip Code :

E-Mail :

Phone :

Please Send Payment to:

Metro Lutheran Ministry
C/O Ready! Set! Feast!
3031 Holmes
Kansas City, MO 64109

Questions?

Rebecka Noel, Director of Community Engagement
816-285-3154 / rebeckanoel@mlmkc.org
www.mlmkc.org

Signature

Signature

METRO
LUTHERAN
MINISTRY

THANK YOU FOR YOUR SUPPORT

