



Saturday | June 7, 2025 | Community Park | 11 AM - 3 PM

SPONSORSHIP COMMITMENT FORM

To ensure that we correctly recognize your contribution, please complete this form in its entirety and email with your logo (JPG/PNG) to pride@rainbowbroomfield.org.

Sponsor Name _____ Primary Contact Name _____

Address _____ City _____ State ____ Zip _____

E-mail _____ Phone Number _____

Website _____

Sponsorship Total	_____
Red-hot	\$5000
Orange	\$2000
Green	\$500
True-blue	\$250
Lilac	\$100

Yes, we want a booth! Contact us to arrange the details.

Payment

Please charge my credit card to the above amount.

Name as shown on card _____

Card Type _____ Card# _____ CV _____

Exp. Date _____ Address _____

City _____ State _____ Zip _____

Signature _____

My check for the above amount payable to Rainbow Broomfield is enclosed.
PO Box 2022
Broomfield, CO 80038

Please invoice me at the above email address (due April 1st).