



PARTNER WITH US

Company Name: _____

Contact Person: _____

Mailing Address: _____

Phone: _____

Email: _____

I want to support the Junior League of Columbia in 2018-2019 as a:

- League Leader (10,000+)
- League Partner (\$5,000-\$9,999)
- League Advocate (\$2,500-\$4,999)
- League Supporter (\$1,000-\$2,499)
- League Friend (\$500-\$999)
- Other Amount: \$_____
- In-Kind Sponsor: _____

You may also choose to be invoiced between now and April 30, 2019 at any time and in any increment.

Please invoice me for the amount of \$_____ on _____ date.

PLEASE MAKE CHECKS PAYABLE TO JUNIOR LEAGUE OF COLUMBIA.

ATTN: MEAGAN BAILEY
JUNIOR LEAGUE OF COLUMBIA
2926 DEVINE STREET
COLUMBIA, SC 29205

- or -

EMAIL THIS FORM TO MEAGAN AT MSBAILEY@LEXHEALTH.ORG

THANK YOU FOR SUPPORTING THE JUNIOR LEAGUE OF COLUMBIA!