



Odyssey House[®]

Where recovery gets real

Sponsorship Opportunities

Thank you for supporting Odyssey House. Proceeds from Run for Your Life help to maintain our programs and provide a safe, supportive residential community focusing on drug-free living, family reunification, and educational and vocational training.

Silver Sponsor, from \$1,000 to \$4,999

- Participation in special race-day recognition ceremony
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge

Gold Sponsor, from \$5,000 to \$14,999

- Participation in special race-day recognition ceremony
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast

Platinum Sponsor, from \$15,000 to \$24,999

- Participation in special race-day recognition ceremony
- Company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast

Titanium Sponsor, \$25,000 and above

- Participation in special race-day recognition ceremony
- Prominent placement of company logo on race t-shirt, banner, signage, website, and marketing materials
- Team entry in Corporate Challenge
- Race-day VIP breakfast



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Sponsorship Agreement

We hereby agree to provide sponsorship funding for the **Odyssey House 12th Annual Run for Your Life 5K Run & Recovery Walk** on September 9, 2017 in the amount indicated below in exchange for the sponsorship benefits applicable to the contribution level:

___ Titanium Sponsor (\$25,000)

___ Platinum Sponsor (\$10,000)

___ Gold Sponsor (\$5,000)

___ Silver (\$1,000)

*****We must receive a completed agreement by August 4th to put your logo on the banner*****

We give Odyssey House permission to use our name and/or logo for all promotional activities associated with ***Run for Your Life 2017***.

Contact Name _____

Title _____

Organization/Company _____

Street Address _____

City _____

State _____

ZIP _____

Phone _____

E-mail _____

Payment: ___ Check enclosed (please make checks payable to Odyssey Foundation)

___ Please bill my: VISA MasterCard American Express Discover

Name on card _____

Card number _____ Exp. date ____/____ Sec. Code _____

Signature _____

___ Please invoice me.

Please send your logo (eps preferred, or high resolution jpg) by August 4th to cabrams@odysseyhousenyc.org.

Mail or fax this agreement to:

Carolyn Abrams

Odyssey House

120 Wall Street, New York, NY 10005

Fax (212) 361-1666