

My business would like to partner with Pikes Peak Christian School and become a proud supporter of Christian Education through Christ-centered excellence!

Business Name:	
Business Address:	
Business Phone:	Business Fax:
Business Web address:	
Primary Contact Name and Title:	
Primary Contact Phone:	Primary Contact Email:

My business would like to become a partner with Pikes Peak Christian School at the following level:

Please Select	Partnership Level	Partnership Amount	Payment Option (Please circle)	
	Soaring Eagle Partner	\$5,000	In-Full	Monthly
	Peak Partner	\$3,000	In-Full	Monthly
	Maroon and Gray Partner	\$1,000	In-Full	Monthly
	Athletic Partner	\$500	In-Full	Monthly
	The Arts Partner	\$500	In-Full	Monthly
	STEM Partner	\$500	In-Full	Monthly
	Hearts and Hands Service Project Partner	\$250	In-Full	Monthly
	Other (ie: in-kind support, volunteer service, etc.):	Varies	Please complete spreadsheet on page 2.	

Sponsorship Payment Options (Check One):

_____ Please send an invoice for the sponsorship amount indicated

__ Payment in-full is enclosed. Please make check payable to Pikes Peak Christian School. Amount: ______ Check Number: ______

I'd like to provide support on a monthly basis. Partnership will be paid monthly for 10 months. Payments due on the 1st of each month. (August 1st, 2018 – May 1st, 2019).

____ For in-kind support, I have completed the spreadsheet on page 2.

Christ Centered Excellence

Please complete this chart ONLY if you have chosen the "Other" support Partnership option. Indicate 'N/A" if you have chosen another Partnership option.

Date of Service or Support	Type of Service or Support	Value of Service or Support
		\$
		\$
		\$
		\$
		\$
	Total Value for the Year:	\$

Terms and Conditions of Partnership

- All exchanged promotional materials should be marked with name so that "referral source" may be recognized.
- If partner wishes to "reward upon referral" then benefit level will increase accordingly.
- All partners agree to promote PPCS in the form of newsletter, physical promotional display, social media or other agreed upon method.
- For monthly payment agreements, payment must be received by PPCS by the first business day of the month. Failure to submit payment by the first business day, partner understands that the partnership between PPCS and the above business is terminated.

I have read and understand the above Terms and Conditions of my partnership with Pikes Peak Christian School.

Signature of Primary Contact

Date

Please complete and return this form to PPCS by way of:

Mail: Pikes Peak Christian School Attn: Corporate Partnerships 5905 Flintridge Drive Colorado Springs, CO 80918

Fax: 719-598-1491

Email: Contact Kim Sanders ksanders@ppcseagles.org

Thank you for your support!