

# START A TEAM 2011-12 SPONSORSHIP FORM



Mail to:  
Destination ImagiNation, Inc.  
1111 S. Union Ave.  
Cherry Hill, NJ 08002

Fax to:  
856-881-3596  
Questions:  
Email: AskDI@dihq.org

## SPONSORSHIP INFORMATION

- This sponsorship should support this school:  
Name of School: \_\_\_\_\_ Location of School: \_\_\_\_\_
- This sponsorship should support a team from this state/country: \_\_\_\_\_
- This sponsorship should support a team in need, which Destination ImagiNation will choose.  
 Divulge sponsor information to the team /school       Make my sponsorship anonymous

## BILLING ADDRESS

- Residential       Commercial

Name: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Quantity	Item	Per Unit	Total
	1-Team Pak	\$135	
	5-Team Pak	\$390	
	30-Team Pak	\$2,250	
	100-Team Pak	\$7,000	
	500-Team Pak	\$32,500	
	1000-Team Pak	\$60,000	
	Season support for one team	\$200	
	Other		
NOTE: This donation will start a team on its way to experience Destination ImagiNation - Thanks you! However, teams will also need to pay state, training and tournament fees, plus the cost of their supplies and the travel to/from training and tournaments which generally range from \$200 to \$500 per team.			
			<b>Total Purchase</b>

## PAYMENT METHOD

Choose one method. Payment must be enclosed with this application. Please print or type.

Check # \_\_\_\_\_  
Make checks payable to:  
Destination ImagiNation, Inc.  
In US Dollars only

Money Order  
Payable to Destination ImagiNation, Inc.

Purchase Order  
PO must be signed. Enclose or fax copy.  
We ship as directed by the PO.

Credit Card: Select one:

- Visa     MasterCard     American Express     Discover

Card Number: \_\_\_\_\_ Exp. Date (mm/yy): \_\_\_\_\_

Cardholder Name - Must match billing address information

Cardholder Signature

Phone Number