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**SPONSORSHIP COMMITMENT FORM**

Please fill out the following information and return to Derrick Brooks Charities, in.

We , agree to become a sponsor for the 3rd Annual Derrick Brooks Pensacola Celebrity Classic on August 18th and 19th, 2024.

**Mailing Address**

**Phone Number: Email Address:**

**Contact Name and Title:**

**Desired Sponsorship Level:**

**Payment**

Check enclosed for payment of $ . Please make all checks payable to Derrick Brooks Charities.

**Type of Card** (Circle One): Master Card Visa American Express Discover

**Name on Card:**

**Card Number: Expiration Date: Security Code**

**Address: City State Zip Code**

**Authorized Signature: Date:**

**PLEASE RETURN TO: DERRICK BROOKS CHARITIES 3750 GUNN HIGHWAY SUITE 109 TAMPA, FL. 33618 OR EMAIL TO:**

**BONITA PULIDO** **BONITA@DB55.ORG**

*A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE, WITHIN THE STATE, 1-800-HELP-FLA. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. PLEASE REFER TO NUMBER CH21739*