



Saturday February 10, 2024
www.TourOfKitchens.com

2024 Event Sponsorship Agreement

Select the sponsorship level for your organization. Remember your donation supports grants and scholarships for the Coral Gables Community Foundation.

- Top Chef Sponsor**\$20,000
- Gourmet Sponsor** \$10,000
- Tourist Sponsor**\$5,000
- Foodie Sponsor** \$2,500

Company Name: _____

Company Address: _____

Contact Name & Position: _____

Email Address: _____ Phone Number: _____

Contact/Cell Phone for day of event: _____

SOCIAL MEDIA Facebook _____ Instagram _____

INTERIOR SPACE EXTERIOR SPACE

AFFIRMATION

My company/organization will support the Coral Gables Community Foundation with a Charitable Sponsorship for the **2024 Tour of Kitchens & Tropical Living** on Saturday, February 10, 2024. My company has insurance liability coverage and all relevant business, professional or restaurant licenses. We agree to notify guests about allergens, gluten content, raw or undercooked seafood/shellfish or alcohol contents in any food, beverage or snack.

Payment Method

I will pay by check payable to Coral Gables Community Foundation. Mail payment to Coral Gables Community Foundation, 1825 Ponce de Leon Blvd., PMB#447, Coral Gables, FL 33134. Check Number _____

I will pay by card online (https://cgcf.fcsuite.com/erp/donate/list/event?event_date_id=2023).

I will pay by card – please see below. AMOUNT \$ _____

Card number # _____ Exp. Date (MM/YYYY) _____

Security Code (CVV) _____ Billing Zip Code _____

Card Billing Address _____

PAYMENT AUTHORIZATION AND AGREEMENT

Full Name _____

Signature _____

Date _____



bit.ly/tok24pay