



## Community Partner Sponsorship Form

**Sponsorship Level** (please select):

Community Partner | \$250

Lead Community Partner | \$1,000

**Please print:**

Organization Name (as it is to appear in marketing materials)

Contact Name

Contact Title

Contact Email

Contact Direct Phone/Ext.

Street Address

City

State

Zip

Organization Web Address

Organization Facebook Page

**Logo:**

I understand that I must send a high resolution logo via email to [mmiller@jccmetrowest.org](mailto:mmiller@jccmetrowest.org) no later than **January 8, 2018**. Preferred formats include EPS, AI or PDF (in vector outlines). JPEG or TIF files must be at least 5" x 5" at 300dpi.

**Payment:** Total amount enclosed: \$ \_\_\_\_\_

A check is enclosed payable to:  
JCC MetroWest – NJJFF

Please charge to:



Name of Cardholder

Card #

Expiration Date

Security Code

**Please return with payment by January 8. This will allow us to meet the print deadline.**

***Thank you for your support!***

**Sarah Diamond, Director | New Jersey Jewish Film Festival  
973-929-2938 | [sdiamond@jccmetrowest.org](mailto:sdiamond@jccmetrowest.org)**

