



2025 Community Resource Fair Sponsorship Form

1404 N. Rolling Rd Catonsville, MD 21228
Phone: 443-996-2273/e-mail: info@mlfmd.org
website: www.mlfmd.org

Organization Business Name: _____

Contact Names (s): _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Website: _____

Representative(s) Attending. Name and contact phone number is different from above: _____

- Nonprofit Business

Sponsorship Level Opportunities

- Gold Sponsor \$3,000**
 - Name/logo Health Fair Banner
 - Name of recognition via social media
 - Name/Logo on all printed materials.
 - Name/logo on health fair T-shirt.
 - Name/logo on Website Recognition (1 year)
 - Vendor Table

- Silver Sponsor \$2,000**
 - Name/Logo on all printed materials.
 - Name/logo on health fair T-shirt.
 - Name/logo on Website Recognition (6 month)
 - Vendor Table

- Bronze Sponsor \$1,000**
 - Name/Logo on all printed materials.
 - Name/logo on health fair T-shirt.
 - Vendor Table

- Patron Sponsor \$500**
 - Name on all printed materials.
 - Vendor Table



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Payment Information

Please mail and make checks payable to:

My Life Foundation, Inc.
Attn: Younsun Bae
1404 N. Rolling Rd. Catonsville MD 21228

Please e-mail me an invoice

e-mail address: _____