

1. Corporate Information

Company Name: _____

Mr. Ms. Mrs. Dr. Other: _____

Company Contact: _____

Title: _____

Business: _____

Address: _____

Cell: _____

Fax: _____

E-mail: _____

2. Contribution Type

Sponsorship (Recognition opportunities, **no tax receipt issued**, due to benefits received): **Amount: \$** _____

Sponsorship Level: Signature Platinum Gold Silver Bronze Partner Players

*Hole Name (where applicable): _____

Charitable Donation (Tax receipt issued): **Amount: \$** _____

Goods or Services (No tax receipt issued): **Value: \$** _____

Corporate Signature: _____

For recognition of all sponsorships, please email your corporate logo in high resolution (min 300dpi) in eps or jpg format to logos@worldpartnershipgolf.com.

3. Payment Method (all payments are to be received no later than the tournament date)

By Cheque (Please make cheque payable to Aga Khan Foundation Canada)

By Credit Card: Visa Mastercard American Express

Organization Name (if Corporate Card): _____

Cardholder Name: _____

Card Number: _____ Expiry Date: _____ / _____

Cardholder Signature: x _____ Date: _____

Tax receipts are issued in the
cardholder/chequeholder name

An invoice will be sent for all cash sponsorships

4. Volunteer Information

WPG Volunteer: _____ Address: _____

Phone: _____ E-mail: _____

Aga Khan Foundation Canada
The Delegation of the Ismaili Imam
199 Sussex Drive, Ottawa, Canada K1N 1K6
Phone: 1-800-267-2532
Fax: (613) 567-2532
Charitable Registration #: 10007 2586 RR0001