

REGISTRATION FORM

___ **Yes**, I would like to become an All-Star Team Sponsor at the \$25,000 level.

___ **Yes**, I would like to become a Team of Friends Sponsor at the \$10,000 level.

___ **Yes**, I would like to become a No-Hitter Sponsor at the \$5,000 level.

___ **Yes**, I would like to become a Complete Game Sponsor at the \$2,500 level.

___ **Yes**, I would like to make a flat donation in the amount of \$_____.

**Will you enter a team in the Super "Bowl" Tournament? ___Yes ___No

Please complete the information on the reverse of this card.



**FROM EVERYONE WHO
HAS BEEN GIVEN
MUCH, MUCH WILL
BE DEMANDED; AND
FROM THE ONE WHO
HAS BEEN ENTRUSTED
WITH MUCH, MUCH
MORE WILL BE ASKED.**

LUKE 12:48

_____ I have included a check for \$_____ for The Hudson Family Foundation Sponsorship Package chosen. (Please make checks payable to the Hudson Family Foundation.)

_____ Please charge my credit card \$_____ for The Hudson Family Foundation Sponsorship Package chosen. My credit card information is listed.

_____ Please charge my credit card three (3) equal payments of \$_____, Dec. 1, 2021, Jan. 1, 2022, and Feb. 1, 2022, for my Sponsorship Package chosen.



For additional information, please contact Jenny Hall at 334-707-9007 or jennyjumphall@gmail.com

hudsonfamilyfoundation.com

300 North Dean Road
Suite 5 – #163
Auburn, AL 36830

The Hudson Family Foundation is a 501 (c) (3) non-profit organization. A portion of your donation is tax deductible to the extent allowed by the law. Hudson Family Foundation #26-4239877

Company or Family Name _____

Your Name _____

Address _____

City _____ State _____ Zip _____

Work Phone _____ Cell Phone _____

Email Address _____

BILLING INFORMATION

Name as it appears on credit card _____

Billing Address _____

City _____ State _____ Zip _____

VISA MC DISC AMEX (circle one) Credit Card Number _____

Expiration Date ____/____ Verification Security Number (3 digit code on back of card) _____

Cardholder's Signature _____