



RefuSHE

PARTNERSHIP COMMITMENT FORM

Partnership Level (check one):

Platinum: \$10,000

Gold: \$5,000

Silver: \$2,500

Other: _____

Business/Organization: _____

Primary Contact Name: _____

Job Title: _____

Address: _____

Phone: _____

Email: _____

Please submit a scanned copy of this form via email to Charlotte Halbert, Philanthropic Initiatives Officer, at chalbert@refushe.org. Partnership commitments must be confirmed by September 20, 2018.

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