

SPONSORSHIP FORM

Thank you for your sponsorship of the Post Baccalaureate Program and the Black Medical Association *50 Years Celebration* on May 19, 2019. Please submit this form with payment by May 16. Ad deadline is May 9.

Name of O	organization:	
Name of Co	Contact Person (Please Print):	
Contact Phone Number:E-mail:		
	te to be a: tinum Sponsor: \$ 2,500 nefits include: 10 tickets to the breakfast, program ar Full-page color advertisement in the S Table and banner at the breakfast and organization	Souvenir Book
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[] I wo Medicine)	ould like to make a donation of \$	(payable to WSU School of

Advertisements are full color. All advertising and photographs must be camera-ready and sized to the above dimensions. Acceptable format is a high-quality print PDF. Submit your completed advertisement by email to curtishbk@hmbcdetroit.org. Ad Deadline: May 9, 2019.

Mail this form with check payable to Keep it Real Ministry to: Wayne State University School of Medicine Office of Development and Alumni Affairs, 540 E. Canfield, 1369 Scott Hall, Detroit, MI 48201. For questions or additional information, call Anita Moncrease, M.D., at 248-552-8825.