

Pitch Your Peers The Hamptons Sponsorship Commitment 2024

NAME:	MAILING ADDRESS:	
BUSINESS NAME:		
EMAIL:		
PHONE:		
Our goal is to partner with local businesses to maximize our financial a nual commitment is \$1,000; however, businesses may choose to done through PYP ensures that your dollars will go to help local non-profits membership. Businesses that support at the \$5,000 level or above matcharity by our membership. All business will be recognized at our Annual Committee of the support of t	ate more than \$1,000 — donating s that have been vetted, researche ay elect to have their own commun	generously to our local community d, and collectively approved by ou
\square \$1,000 (suggested minimum amount for membersh	ip)	
□ \$2,500		
□ \$5,000		
□ \$		
SIGNATURE:		DATE:

Our parent, Pitch Your Peers, Inc., is a 501(c)(3) organization. All donations to Pitch Your Peers The Hamptons are tax deductible (EIN 92-1832914). Please make checks payable to **Pitch Your Peers** and mail with this form to:

Pitch Your Peers The Hamptons

c/o Brooke Bohnsack PO Box 719 Amagansett, NY 11930

Please contact Brooke Bohnsack via email at brooke@pypthehamptons.org if you have any questions.

