

CASH SPONSOR REGISTRATION

Company/Sponsor Name

Contact Name

Address

City

State

Zip

Email (Required)

Phone

Fax

SPONSOR AMOUNT

- PRESENTING - \$25,000
- GOLD - \$15,000
- SILVER - \$10,000
- BRONZE - \$5,000
- OLYMPIAN - \$2,500
- CHAMPION - \$1,500
- MPCS FAN - _____

METHOD OF PAYMENT

Please enclose checks.

Make checks payable to Miles Perret Cancer Services.
P.O. Box 80763, Lafayette, LA 70598

QUESTIONS?

Please contact:

Addi Kowalski,
Development Manager
aducote@milesperret.org

T: 337.984.1920 | F: 337.984.1921

Your partnership is sincerely appreciated. By execution of this form, you are affirming your participation as a sponsor at the above-indicated level. To receive all sponsorship benefits, this registration form must be received by April 17, 2026. Payment not enclosed is due by May 22, 2026.

Sponsor Representative: _____ Date: _____

NOTE: Signing this form gives Miles Perret Cancer Services and its agents permission to use images, electronic or photographic, in future promotional materials.