



## 2021 – 2022 SEASON PARTNERSHIP

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
(Required for processing) (Required for processing)

### PARTNERSHIP LEVEL

_____ \$25,000 Title	_____ \$ 6,000 Benefactor
_____ \$15,000 Presenting	_____ \$ 3,000 Supporting
_____ \$10,000 Premier	_____ \$ 1,800 Patron

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\_\_\_\_\_ Check (payable to Aviva Senior Living)

\_\_\_\_\_ Credit Card (enter information below)

\_\_\_\_\_ Funds coming from Foundation \_\_\_\_\_  
(Foundation Name)

Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

**\*Please return this form with payment in the enclosed, self-addressed envelope by Tuesday, September 7, 2021. If not paying by check, you may email this form or to purchase online, please visit**

**<http://weblink.donorperfect.com/Aviva2021-2022SeasonPartnership>**

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***For additional information or questions, please contact Ann Logan, Chief Development Officer at 941.357.1609 or [ALogan@AvivaSeniorLife.org](mailto:ALogan@AvivaSeniorLife.org)***

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (1800-435-7352) WITHIN THE STATE OF FLORIDA. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.

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