



BOX SPONSOR COMMITMENT FORM

Thank You for your sponsorship!

Contact Name: _____

Business Name (if applicable): _____

Contact Address: _____

Contact Email: _____

Contact Phone: _____ (circle one)

Box Number: _____ Front (street) \$400 annually Side Back (beach) \$200 annually

Total Paid: _____

Box Message: (limit to 70 characters, may include a photo)

_____ A

draft of the sign will be sent for your approval prior to printing.

CHECK: Please make checks payable to: **Friends of Jupiter Beach, PO BOX 791, Jupiter, FL 33468-0791** or
to pay online visit www.friendsofjupiterbeach.org and click on the Donate button.

Please circle one: CHARGE: VISA MC AMEX DISCOVER

Name on Card: _____

Billing Address if different from above: _____

Card #: _____

Expiration Date: (MM/YY): _____ CVV _____

Signature: _____