Attention to: Ms Mary Leong / Ms Ang Wen Min AWWA Ltd 9 Lorong Napiri Singapore 547531

AWWA WHEEL PARADE 2020 - RESPONSE FORM
5th September 2020 (Saturday), 8:00am - 10:00am
Sentosa, Siloso Beachwalk

RE: RESPONSE FORM FOR AWWA AWP 2020

Company/Individual's Name:	UEN/NRIC:	
Address:		
Contact Person: Dr/Mr/Mrs/Mdm/Ms	Tel:	
Email (mandatory):		

I. We would like to confirm our donation of the following packages*:

S/N	Donation	Amount	Please tick	Donation Acknowledgements
1	Platinum Donor	\$50,000		 VIP flag off with GOH Donor's logo or name printed on flag Reception at Marquee Acknowledgement on tear drop banners Acknowledgement on flag off arch Acknowledgement on goodie bags Complimentary T-shirts and goodie bags Voice over acknowledgement Acknowledgement in AWWA website/microsite No of Tickets to Wheel Parade - 25
2	Gold Donor	\$25,000		 Donor's logo or name printed on flag Reception at Marquee Acknowledgement on tear drop banners Acknowledgement on flag off arch Acknowledgement on goodie bags Complimentary T-shirts and goodie bags Voice over acknowledgement Acknowledgment in AWWA website/microsite No of Tickets to Wheel Parade - 25
3	Silver Donor	\$10,000		 Donor's logo or name printed on flag Acknowledgement on tear drop banners Acknowledgement on flag off arch Acknowledgment on goodie bags Complimentary T-shirts and goodie bags Voice over acknowledgement Acknowledgement in AWWA website/microsite No of Tickets to Wheel Parade – 10
4	Bronze Donor	\$5,000		 Acknowledgment on flag off arch Complimentary T-shirts and goodie bags Voice over acknowledgement Acknowledgement in AWWA website/microsite No of Tickets to Wheel Parade – 5

^{*}Donors will receive 250% tax-exemption

S/N	Area of Partnership	Items (Please fill in)	Total Amount (Estimated)

We would like to confirm our partnership in other ways:

3/N	Partnership	items (Please IIII III)	Total Amount (Estimated)
1	In-Kind Sponsorship		

S/N	Area of Partnership	No. of Volunteers	Areas of Interest (e.g. as ushers, performers, road marshals, registration counter, first aid)
1	Volunteers		

CONSENT	
I,	(full name as in NRIC) of NRIC/Passport No:
would like to give AWW/	A Ltd the permission to collect, use and disclose my personal data provided in this form for

 Reports and submission to governmental or governmental related agencies for tax exemption, sponsorship reports and evaluation, including but not limited to audit reviews.

AWWA publicity and outreach, fundraising and activities

II.

the purposes of:

Signature	Date