

## DAY SPONSORSHIP AGREEMENT FORM

I would like to sponsor a day of programming on Catholic 540-AM Divine Mercy Radio in honor of: \_\_\_\_\_

Requested DATE to be aired: 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

Script (or information to be included in script): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### REQUESTER'S INFO:

Name \_\_\_\_\_

Address \_\_\_\_\_

City ST Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Parish \_\_\_\_\_

### DONATION AMOUNT: \$350

Paying by Check (made payable to Divine Mercy Radio)

Paying by Credit Card

Card Number: \_\_\_\_\_

Exp Date (MM/YY) \_\_\_\_/\_\_\_\_ SEC \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

### SIGNATURES

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

DMR Rep Signature \_\_\_\_\_ Date \_\_\_\_\_

*Email completed form to [RadioTime@catholic540.org](mailto:RadioTime@catholic540.org) or send to our address at top of page.*

***QUESTIONS? Do not hesitate to call!***