

The Bridge 14th Annual **Sleepout** **24-hour Fundraiser**

Friday, November 25 5pm through Saturday, November 26 5pm

Sleepout Contribution Form

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Contact Person: _____ Contact Phone: () _____ - _____

Contact E-mail: _____

The Sleepout goal is to raise \$30,000
which funds 100 regular vouchers

**Amount
of
Contribution**

- ☐ Diamond – \$5,000 or more
- ☐ Platinum – \$1,000
- ☐ Gold – \$500
- ☐ Voucher – \$300
- ☐ Silver – \$250
- ☐ Bronze – \$125
- ☐ Other – \$ _____

In addition to your generous contribution, please consider “sleeping out” with us in our make shift home in front of the Sayre Theatre for one of the 24 hours of the Sleepout to raise awareness of those in need!

Name of Person(s) “sleeping out:” _____

Phone Number: () _____ - _____ E-mail: _____

To schedule a time, contact Kim Paul at (607) 565-4795 or dpaulfamily@gmail.com or fill in below your top 2 preferences for times to “sleepout.”

1. _____ 2. _____

We will do our best to match your request on a first come, first served basis and will notify you of the actual time slot assigned.

Send this completed form and check to: The Bridge, P.O. Box 202, Sayre, PA 18840

*Please note that all checks should be made payable to “**The Bridge.**”*