



3rd Annual CONTACT Cape-Atlantic Triathlon

Sponsor Form

COMPANY NAME: _____

ADDRESS: _____

PHONE: _____

CONTACT NAME: _____

I / we would like to show our support of CONTACT Cape-Atlantic by being a sponsor of the:

3rd Annual CONTACT Cape-Atlantic Triathlon

Starting Date: January 19, 2009

Finishing Date: February 19, 2009



I have enclosed my \$100 donation.

Sponsors will have the name of their business printed on all T-shirts and promotional materials.

This event is in cooperation with the Ocean City Aquatic & Fitness Center, 18th and Simpson Ave., Ocean City, NJ. All proceeds help CONTACT Cape-Atlantic provide telephone reassurance and community support for the elderly and disabled.

Please make check payable to CONTACT Cape-Atlantic and return to:

PO Box 296

Somers Point, NJ 08244

For more information call:

Ann P. Magee

(609) 823-1850

ann_magee@comcast.net

www.contactcapeatlantic.org