



BECOME A 2020 LAKE PARTNER

Mendota • Monona • Wingra • Waubesa • Kegonsa • Yahara River



A healthy community needs healthy lakes. Become a Lake Partner and join Clean Lakes Alliance as we work for healthy lakes.

Annual donations (Jan. 1- Dec. 31) made by Lake Partners (business or organization 'members') directly benefit efforts to protect our lakes independent of events, sponsorships, or programs. As a Lake Partner, your annual contribution will support on-the-ground projects, educational programs, and water quality monitoring.

LAKE PARTNER BENEFITS

- 1 Special recognition in the 2020 Greater Madison Lake Guide and at the Community Breakfast
- 2 Free admission to our monthly Yahara Lakes 101 Science Café for all employees
- 3 Access to one of our scheduled volunteer days held April to October
- 4 Early access to tickets and discounted rates to events like Frozen Assets and Community Breakfast
- 5 Marketing recognition and opportunities to sponsor events and programs

YES, I'D LIKE TO BECOME A LAKE PARTNER!

Support our lakes and make a tax-deductible donation today!

- \$75 - **Small Nonprofit**, suggested for 0-25 employees
- \$100 - **Small Business**, suggested for 1-10 employees
- \$250 - Suggested for 11-50 employees
- \$500 - Suggested for 51-99 employees
- \$750 - Suggested for 100-249 employees
- \$1,000 - **Yahara Society**, suggested for 250-499 employees
- \$2,500 - **Yahara Society**, suggested for 500-999 employees
- \$5,000 - **Yahara Society**, suggested for 1,000+ employees

COMMUNITY BREAKFAST SIGN UP

SPONSOR A TABLE

Lake Partner Rate **Regular Rate**

- \$850 \$1,000 Table Sponsor
- \$400 \$500 Government/Nonprofit/Education Table

PURCHASE A TICKET

- | | | |
|-------------------------------|-------------------------------|-------------------------------|
| Student | Nonprofit | Regular Rate |
| <input type="checkbox"/> \$25 | <input type="checkbox"/> \$50 | <input type="checkbox"/> \$75 |

Business Name _____ please list as you would like name to appear in all materials and acknowledgement

Primary Contact _____

Street Address _____

City, State _____ ZIP _____

Email _____ Phone _____

Payment Options (please check one) Card provided Check enclosed Invoice me

Credit Card Information I authorize Clean Lakes Alliance to bill the card listed below

Cardholder Name _____ Cardholder ZIP _____

Card # _____ Exp. Date _____ CVV Code _____