Celebrating 70 NSO YEARS OF HEART WORK
Neighborhood Service Organization

CORPORATE Sponsorship PROSPECTUS FORM

Company/Organization Name: _____

Contact: _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____)_____ Fax: (_____)_____

Email: _____ Website: _____

Sponsorship Levels

We would like to participate at the Sponsorship Level indicated below.

X	Sponsorship Level	Fee	#Available
	Partner	$50,000	Unlimited
	Visionary Partner	$25,000	Unlimited
	Leadership Circle	$15,000	Unlimited
	Impact Sponsor	$10,000	Unlimited
	Community Partner	$5,000	Unlimited

Payment Information

☐ Our check is enclosed made payable to: Neighborhood Service Organization (NSO)

☐ Please invoice: $_____ ☐ Monthly ☐ Quarterly

☐ Please make a one time charge to my credit card for: $_____

☐ Please make ____ *(quantity)* recurring charges to my credit card for $_____ through 9/15/2026.

☐ ACH Payment: Routing #_____ Bank Account # _____

Type of credit card ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Card Number: _____ Exp. Date: _____

Billing Address: (If different than above) _____

City: _____ State: _____ Zip Code: _____

Name on Credit Card: _____

Signature: _____

• Please invoice my company. Purchase Order Number: _____

NSO is a 501(c)3 nonprofit organization, contributions to NSO are tax deductible as allowed by law.

Return Form & Payment to:

Neighborhood Service Organization
Corporate Development Office
Attention: NSO Corporate Giving
882 Oakman Blvd., Suite C • Detroit, MI 48238