



COMMUNITY PARTNER PROGRAM COMMITMENT FORM

Community Partner Level

- ☐ \$50,000 CHAMPION
- ☐ \$25,000 VALEDICTORIAN
- ☐ \$10,000 BENEFACTOR
- ☐ \$5,000 LEADER
- ☐ \$1,500 FRIEND

Contact

Company/Agent Name (as you wish it to appear for Community Partner Program recognition materials)

Contact Name First Last

Company Name Title

Address Street ☐ Business ☐ Home

City State Zip

Phone ☐ Home ☐ Office ☐ Cell Website

Email

Payment (By mail or email)

☐ By Credit Card Please charge my credit card \$ _____

Cardholder Name

Credit Card # Expiration Date CVV#

☐ By Check: Please mail this form and check payable to:
Manhattan Beach
Education Foundation
P.O. Box 1110
Manhattan Beach, CA 90267

☐ By Email: david@mbef.org

I understand and agree all donations made are final and non-refundable. Your donation is tax-deductible to the full extent of the law.

Signature of Commitment Date



www.mbef.org
www.endowment.mbef.org

TO COMPLETE YOUR ENROLLMENT

Submit this form along with your
business logo and URL to:

David Brennan
Director of Development & Partnerships
david@mbef.org | 310-303-3342