



2020 CORPORATE PARTNERSHIPS & BENEFITS

Join our school in its commitment to inclusion, acceptance, and embracing the uniqueness of every child. Our sponsors believe in our mission of educating children in an inclusive environment, creating a culture of acceptance, and inspiring an appreciation for learning. They provide on-going support for Oak Creek Academy’s daily operation and vision for the future.

Benefits	15,000	10,000	5,000	2,500	1,500
Company name or individual recognition on our Annual Donor Wall.	✓	✓	✓	✓	✓
Company name or individual recognition in our Annual Report.	✓	✓	✓	✓	✓
Company name or individual name listed on website sponsor.	✓	✓	✓	✓	✓
Recognition of company/individual in quarterly press release.	✓	✓	✓	✓	
Company’s clickable logo on Oak Creek Academy Website.	✓	✓	✓	✓	
Recognition in monthly Member & Donor E-newsletter for 12-months	✓	✓	✓		
Logo on Annual T-Shirt Design for Oak Creek Academy	✓	✓	✓		
Press Release with check presentation photo op.	✓	✓			
Name a classroom - plaque outside of a classroom with company logo or individual name.	✓	✓			
Monthly social media marketing post with company name and logo. (12-months)	✓				
10% family discount on tuition for 1 academic year at Oak Creek.	✓				

To learn more about sponsoring or for gifts over \$15,000, contact us at 254-526-9299. Donations can be made through our online giving portal or via check. Checks should be made out to Academy for Exceptional Learners.

On behalf of everyone at Oak Creek Academy, we would thank you for your decision to be an Oak Creek Academy sponsor. Your on-going support ensures that Oak Creek Academy can continue to further its vision and grow as a community. Your contributions have truly impacted the lives of our exceptional children. Our students can learn and grow at their own pace, in a school that celebrates inclusion, acceptance, and uniqueness. Again, we thank you for your continued support in all we do.



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Company: _____

Date: _____ Contact Name & Title: _____

_____ Please invoice me \$ _____

_____ Charge my credit card a one-time amount of \$ _____

Account Type: Visa _____ Master Card _____ Amex _____

Cardholder Name: _____ Account or Card Number: _____

Expiration Date: _____ CVV2 Sec. Code: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Partnership Level (select one):

Other \$ _____ \$15,000 _____ \$10,000 _____ \$5,000 _____ \$2,500 _____ \$1,500 _____

PAYMENT OPTIONS:

_____ A check is enclosed for \$ _____. Please make checks payable to: *Academy for Exceptional Learners
1020 Trimmer Rd. Killeen, Texas 76541*

Signature: _____ Date: _____

I authorize the abovenamed business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one-time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Corporate Partner

Oak Creek Academy

Name: _____

Name: _____

Title: _____

Title: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Please complete and return in the enclosed envelope, or email to Tracy Hanson at info@oakcreekkilleen.org