























LEGACY RACE

Battling Breast Cancer

October 4, 2025 | 5K & Beer Garden | Norris-Penrose Event Center

	PRESENTING	POWER	STRENGTH	HOPE
COST	\$15,000	\$7,500	\$3,000	\$1,500
LOGO ON ALL SOCIAL MEDIA/ ADVERTISING	 largest logo			
LOGO ON REGISTRATION WEBSITE	 largest logo			
EVENT RECOGNITION				
TENT AT EVENT*				
MAIN STAGE ANNOUNCEMENTS	3	2	1	
LOGO START LINE RECOGNITION				
BANNER*	2	1		
COMPANY PARTICIPATION				
COMPLIMENTARY LEGACY RACE REGISTRATIONS				
SPONSOR GARDEN PARTY INVITATIONS				
SPONSOR GARDEN PARTY UNDERWRITER	EXCLUSIVE CATEGORY SPONSOR	FINISH LINE WATER STATION	WATER STATIONS (ON COURSE)	BEER TASTER CUPS
\$2,500 (cash or in-kind)	\$20,000	\$2,500 (cash or in-kind)	\$1,500 (cash or in-kind)	Market Price
Includes Hope sponsor benefits	Includes Presenting sponsor benefits	Includes Hope sponsor benefits	Includes Hope sponsor benefits	
Exclusive party for all the sponsors prior to the race.	Your company will be the only one of its kind (i.e. restaurant, auto dealer, construction firm)	exclusive opportunity, no limits on costumes, decoration, or banners	3 opportunities, no limits on costumes, decoration or banners	300 4-5oz cups with your logo** used at the beer garden after race.

*To be provided by sponsor
**Logo provided 1 month prior to event



2025 Legacy Race Sponsorship Commitment

Name/Title _____

Email _____

Organization _____

Address _____

City _____ State _____ ZIP _____

Legacy Race contact _____ Phone _____ Email _____

I (We) would like to be a sponsor at the following level:

\$15,000 Presenting \$ 3,000 Strength \$ _____ Other

\$7,500 Power \$1,500 Hope

I (we) are interested in becoming an Exclusive Sponsor, please contact me.

Check enclosed Please Invoice Credit Card

Name on card: _____

Card number: _____

Expiration: _____ CVV: _____

Signature _____

Return this completed form and your check, payable to
Norris Penrose Event Center | Legacy Race Battling Breast Cancer
1045 Lower Gold Camp Rd Colorado Springs, CO 80905

If you're filling this out digitally,
please email your completed form to
sponsorinfo@legacyrace.org