CAF UNIT MANUAL SECTION 6

SPONSORSHIP January 2017



AIRCRAFT SPONSORSHIP CHECKLIST

(Rev. Jan. 2017)

AIRCRAFT TO BE SPONSORED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_N#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AIRCRAFT ASSIGNED TO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO YOU INTEND TO PILOT THE AIRCRAFT YES NO

NAME SPONSORSHIP IS TO BE RECORDED UNDER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BUSINESS PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| TYPE OF SPONSORSHIP  | TOTAL AMOUNT  | DEFERRED PAYMENTS | AMOUNT OFINITIAL PAYMENT |
| AIRCRAFT SPONSOR | $1,500 $3,500 $5,000 $10,000 | YES  NO |  |
| RESTORATIONSPONSOR |  $ 750 $1,750 $2,500 $5,000 |  Yes NO  |  |
| SUPPORTINGSPONSOR |  $ 150 $ 350 $ 500 $ 1,000 | Deferred Payment Not Available |

Please use the form letter for deferred payments to establish a payment schedule. The new sponsor must complete this form and return it to Headquarters to ensure the sponsorship account is established and monitored accurately. All deferred payments must be completed within a two (2) year period.

 All sponsorship privileges are granted upon full payment of the total sponsorship funds. Deferred Sponsorships that are not paid in full within two years will be considered donations to the aircraft and will not be recognized as completed sponsorships.

 All sponsorship privileges will be granted in accordance with Sec. 6 of the CAF Unit Manual. If you have any questions, please contact CAF Headquarters

CAF UNIT MANUAL SECTION 6

SPONSORSHIP January 2017

COMMEMORATIVE AIR FORCE

P.O. BOX 764769

DALLAS, TX 75376-9904

DEAR SIR OR MADAM:

I wish to take advantage of the Sponsorship Deferred Payment Plan. I pledge my $\_\_\_\_\_\_\_\_\_\_ sponsorship to the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am placing $\_\_\_\_\_\_\_\_\_ down (minimum of 10%) and will pay the remainder in \_\_\_\_\_\_\_ installments of $\_\_\_\_\_\_\_\_\_\_.

Payments should be made at least quarterly; however, you may pay as often as you choose provided you meet your established payment schedule.

I am aware that my sponsorship wings, plaque and privileges will be granted upon completion of my obligations and that there will be no interest charged for participation under this plan.

Additionally, I understand that if I am not able to make the payment schedule indicated above, I must contact Headquarters and work out a payment option. Should I fail to meet the deferred sponsorship time limit of two (2) years, all funds will be considered a donation to the aircraft account.

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COL. I.D.\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_\_\_\_ZIP CODE\_\_\_\_\_\_\_\_\_\_\_\_

AIRCRAFT & N-NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Payment enclosed.

 Charge my credit card  One Time  Monthly  Quarterly  Yearly until completion of the

payments.

Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Card Expiration Date\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_