



INSTITUTE OF CLASSICAL
ARCHITECTURE & ART
FLORIDA CHAPTER

2026 Sponsorship Information Form

Company Name _____

Company Address _____

Company City _____ State _____ Zip _____

Company Website _____

Contact's Name _____

Contact's Email _____

Company Phone Number _____ Contact's Phone Number _____

Sponsorship Level _____ Amount \$ _____

**All benefits begin upon receipt of sponsorship donation payment.*

Signature _____

Date _____

Forms of Payment:

*Process payment through ACH or Wire Transfer. Contact Deborah Eschenbacher, Chapter Director, at 614-581-1860 for instructions.
Email printable Sponsorship Form separately to director@flclassicist.org*

OR

Mail check with completed [printable Sponsorship Form](#) with tracking number to mailing address on bottom of this form.

Check # _____ Mail Tracking # _____

Payment Date _____

OR

*Click button on the website to process your Sponsorship Payment via credit card online. Please note that a 3% processing fee will be added.
Next, complete the [printable Sponsorship Form](#) and email to director@flclassicist.org*

**Donations are deductible to the fullest extent of the law*

*Institute of Classical Architecture & Art (ICAA), Florida Chapter
P.O. Box 690156 Vero Beach, Florida 32969-0156
director@flclassicist.org 614-581-1860
www.flclassicist.org*