



SPONSORSHIP LEVEL:

\$250,000—Luminary

\$100,000—Advocate

\$50,000—Hero

\$20,000—Reformer

\$7,500—Defender

\$5,000—Guardian

I am / We are unable to attend but wish to be a program sponsor by making a fully tax-deductible contribution of \$2,500.

\$500 ticket (includes RFKHR ballcap and mask, RFKHR Book Club one-year membership, recognition as “Friend of RFKHR”)

\$100 ticket (includes RFKHR mask)

My company will match my gift; the form is enclosed.

CONTACT INFORMATION:

\_\_\_\_\_  
Company or individual name (for program listing):

\_\_\_\_\_  
Contact name (if different from above):

\_\_\_\_\_  
Company:

\_\_\_\_\_  
Address:

\_\_\_\_\_  
City:

\_\_\_\_\_  
State:

\_\_\_\_\_  
ZIP:

\_\_\_\_\_  
Telephone (day):

\_\_\_\_\_  
Fax:

\_\_\_\_\_  
Email:

PAYMENT DETAILS:

Please indicate preference for the total amount of: \_\_\_\_\_

Check payable to Robert F. Kennedy Human Rights

Credit card (VISA / MC / AmEx)

\_\_\_\_\_  
Card number:

\_\_\_\_\_  
Exp:

\_\_\_\_\_  
CVV/CSC:

\_\_\_\_\_  
Name on card:

\_\_\_\_\_  
Signature:

Your donation supports the work of RFK Human Rights. You may designate 10% of your gift to:

Racial and Economic  
Equity Fund

Human Rights and  
COVID-19 Fund

Young Leaders' Human  
Rights Defenders Fund

For additional information, please contact  
Melissa Cather at [cather@rfkhumanrights.org](mailto:cather@rfkhumanrights.org)  
or (617)-593-5588.

Please complete this form and send with your payment to:  
Robert F. Kennedy Human Rights  
P.O. Box 982, New York, NY 10272