



DONOR/REGISTRANT INFORMATION

Company/Organization (to be listed as) _____

Website: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Contact Phone: _____

Email: _____

Include extra sheet with contact information for guests attending with your sponsorship

Signature of Person Authorizing Sponsorship: _____

REGISTRATION AND PAYMENT DETAILS

- Check made payable to Carolina Cancer Foundation – **by April 20, 2026**

*Include this form along with your check to: CCF, attn: Natasha Morrison,
8121 Rourk Street, Myrtle Beach, SC 29572*

** Contact Erick Grier at egrier@coastalcancercenter.com to become a sponsor or with any questions about the event**

Please reserve your sponsorship by April 6, 2026

CAROLINA CANCER FOUNDATION

Tax ID# 57-1113364

Carolina Cancer Foundation is a 501(c)(3) tax-exempt organization under the U.S. Internal Revenue Code