

BRAIN INJURY ASSOCIATION OF NEW YORK STATE
CORPORATE PARTNERSHIP 2025
COMMITMENT FORM

Company Name _____

Address _____

City/State/Zip _____

Website _____

Contact Name _____

Contact Phone _____

Contact Email _____

Corporate Partner Level

Diamond Partner \$25,000

Silver Partner \$5,000

Platinum Partner \$15,000

Bronze Partner \$2,500

Gold Partner \$10,000

Copper Partner \$1,500

PAYMENT OPTIONS:

Enclosed is a check made payable to BIANYS

Invoice me

Contact me to charge my credit card

Please submit the completed commitment form by mail or email to:

BIANYS
Attention: Corporate Partners
5 Pine West Plaza, Suite 506
Albany, NY 12205
info@bianys.org

