

**Response Form**  
**AAO Foundation Corporate Partner**

**Continued Commitment to the Specialty®**

Yes, I would like to make a **Continued Commitment to the Specialty®** through the AAO Foundation to benefit orthodontic education and research by pledging over the next \_\_\_ five years or \_\_\_ ten years at the following level and becoming an AAOF **Corporate Partner** or to increase our support:

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Diamond Corporate Partner</b><br>(\$1,000,000) | <input type="checkbox"/> <b>Platinum Corporate Partner</b><br>(\$500,000) |
| <input type="checkbox"/> <b>Gold Corporate Partner</b><br>(\$250,000)      | <input type="checkbox"/> <b>Silver Corporate Partner</b><br>(\$200,000)   |
| <input type="checkbox"/> <b>Ambassador Corporate Partner</b>               | <input type="checkbox"/> <b>Founder - \$100,000</b>                       |
| <input type="checkbox"/> <b>Fellow - \$50,000</b>                          | <input type="checkbox"/> <b>Regent - \$25,000</b>                         |
| <input type="checkbox"/> <b>Mentor - \$17,500</b>                          | <input type="checkbox"/> <b>Benefactor - \$10,000</b>                     |
| <input type="checkbox"/> <b>Patron - \$7,500</b>                           | <input type="checkbox"/> <b>Supporter - \$5,000</b>                       |

\_\_\_ Please restrict my gift solely to the Endowment Fund.

\_\_\_ You may use my gift for orthodontic education and operational expenses at the discretion of the AAO Foundation Board of Directors.

Name of Company: \_\_\_\_\_

Attn: \_\_\_\_\_

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

\_\_\_\_\_

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

Comments: \_\_\_\_\_

\_\_\_\_\_



Continued Commitment to the Specialty™

**American Association of Orthodontists Foundation**

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