ADDICTION IS REAL

PLAY BINGO,
HELP SAVE A LIFE



VIP DESSERT BAR PROVIDED
WITH EVERY TICKET

TUESDAY,
SEPTEMBER 24, 2024
6-8 PM

CHICKEN N PICKLE ST. CHARLES
1500 S MAIN ST, SAINT CHARLES, MO 63303

SIGN UP HERE!

Sponsorship, Item/Dessert Donation and Bingo Ticket Levels
(values can be combined and will receive benefits at the appropriate level)

VIP Dessert Bar Bingo Night: 1 Ticket
Price: **$15.00**

Each ticket includes one admission, unlimited access to our VIP Dessert bar, and the chance to win awesome bingo prizes!

Extra Bingo Card Set
Price: **$10.00**

Choose as many as you would like to play - just remember there is limited space at each table. Each extra set includes 10 rounds with three cards for each round!

Bronze Sponsorship
Price: **$100.00**

Each sponsorship includes: 4 VIP Dessert Bar Bingo Tickets, 1 social media mention, Listing on event signage

VIP Dessert Bar Sponsor

Donate dessert valued at $100 + and will receive the following benefits: Each VIP Dessert Bar sponsorship includes: 2 VIP Dessert Bar Bingo Tickets 1 social media mentions (link to your bakery site/social media) Listing on event signage

Silver Sponsorship
Price: **$150.00**

Each sponsorship includes: 6 VIP Dessert Bar Bingo Tickets. 1 social media mention, Listing on event signage

Gold Sponsorship
Price: **$250.00**

Each sponsorship includes: 10 VIP Dessert Bar Bingo Tickets 2 social media mentions Listing on event signage

ADDICTION IS REAL
Stop the silence.
Start the conversation.
Save a life.

SPONSOR COMMITMENT FORM



Sponsor Information: Please use this form OR register as sponsor/donor/register: https://bit.ly/4dxhEoJ

Sponsor Name as to be listed: _____
Main Contact:_____
Phone: (____)_____-_____ ☐Cell ☐Home Title:_____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____

Registration/Sponsorship/Item/Dessert Donation

___ I would like to buy ____ Tickets at $15 each and ____ Extra cards at $10 each TOTAL:$_____

___ Sponsorship Level:_____ Amount:$_____

___ Item Donation:_____ Value:$_____

___ Dessert Donation:_____- pieces of _____ Value:_____

Total Donation Amount+Value: $_____ ☐Donation ☐Pledge ● ☐Once ☐Yearly ● ☐Bill Me

☐Credit Card ☐Check Enclosed ☐Gift from Donor Advised Fund ☐Qualifies for Match

Name on Card: _____ Expiration Date:____/____ CVC Code____

Zip Code (Billing address):_____ Confirm Amount to be Charged Today: $_____

Memorial/Tribute Information:

(A card or letter will be mailed to notify the recipient of your gift. No dollar amount is mentioned. We can also mail the card/letter to your address for gifting. Please just let us know what you need!)

This Donation is in ☐Honor ☐Memory of:_____
To Acknowledge (ex: Holiday, Birthday, Birth, Death):_____

☐ Please Send Notification to Name: _____

Address: _____

City: _____ State:_____ Zip:_____

Email: _____

Note to include with card: _____

For Tax Deduction Please Return To: Addiction is Real · 6209 Mid Rivers Mall Drive #310 · St. Peters, MO 63304
or fill out and email a photo/scan of the document to teri@addictionisreal.org
All donations are tax deductible as allowed by law EIN 81-1896239