



SUNDAY, APRIL 22, 2018

Sponsorship Levels

\$2,500 Event Sponsor

- Sponsor name recognized as Event Sponsor on tee shirts, in the Logan Daily News post-walk ad and mention on the FairHoPe Hospice radio programs
- Sponsor's sign displayed on walk route at fairgrounds and sponsor's banner at **START/FINISH LINE**
- Picture with sponsor submitted to the Logan Daily News
- Logo listed on sponsor board at registration on event day
- Opportunity to place promotional materials at registration

\$1,000 Major

- Sponsor name recognized as Major Sponsor in on tee shirts in the Logan Daily News post-walk ad and mention on the FairHoPe Hospice radio programs
- Sponsor's banner at **Registration**
- Picture with sponsor submitted to the Logan Daily News
- Logo listed on sponsor board at registration on event day
- Opportunity to place promotional materials at registration

\$500 Patron

- Sponsor name recognized in the Logan Daily News pre-walk and post-walk ads
- Sponsor's name on tee shirts
- Picture with sponsor submitted to the Logan Daily News
- Logo listed on sponsor board at registration on event day
- Opportunity to place promotional materials at registration

\$250 Partner

- Sponsor name recognized in newspaper post-walk ad
- Sponsor's name on tee shirts
- Name listed on sponsor board at registration on event day

*Sponsorship commitments must be received by
Friday, March 30, 2018 to be eligible for all sponsorship level*



Sunday, April 22, 2018
Sponsorship Commitment

Company Name _____

Contact Name _____

Address _____

Phone _____ Office / Cell / Home

Email _____

We would like to support the **2018 Annual Family Memorial Walk** at the following level:

- | | | | |
|---|---------|---|-------|
| <input type="checkbox"/> Event Sponsor | \$2,500 | <input type="checkbox"/> Patron | \$500 |
| <input type="checkbox"/> Major | \$1,000 | <input type="checkbox"/> Partner | \$250 |

☐ Please invoice me for the above amount ☐ Check enclosed

☐ Charge to credit card (Visa, Mastercard)

Card Number: ____/____/____/____

Expiration date ____/____ CV2 ____

Name on card _____

☐ *I do not wish to sponsor but would like to make a donation in honor/memory of family/friends.*

Please mail to: FairHoPe Hospice & Palliative Care, Inc.
12892 Grey Street, Logan, Ohio 43138

*Sponsorship commitments must be received by
Friday, March 30, 2018 to be eligible for all sponsorship level benefits.*



Sponsor Representative

Date

282 Sells Rd • Lancaster OH 43130-3461 • (740) 654-7077
12892 Grey Street • Logan OH 43138-9638 • (740) 380-1186
www.fairhopehospice.org