



# 2017 SPONSOR FORM

Boots, Bags and Bling for St. Jude

Thursday, March 30, 2017 • River Crest Country Club

## PERSONAL, CORPORATION OR FOUNDATION SPONSOR

FIRM NAME/INDIVIDUAL \_\_\_\_\_ DATE \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

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## ST. JUDE CHILDREN'S RESEARCH HOSPITAL PRINTING AND PUBLICATIONS

- ☐ Please use the following (individual, corporation or foundation) for Sponsor listing in St. Jude Children's Research Hospital publication, donor presentation and other printed materials. **Print exactly as name should appear and Circle the ONE Alphabetizing Letter.**

- ☐ I (We) prefer not to be listed in any printed materials.

## LUNCHEON SPONSORSHIP OPPORTUNITIES

### ☐ PRESENTING SPONSOR (\$15,000)

- Luncheon (Three Tables for 10)
- Recognition in All Printed Materials
- Company Logo/Name on Event Website
- Full Page Color Ad in Event Program
- Speaking Opportunity at Event
- Sponsor Gift

### ☐ ANGELS' WING SPONSOR (\$5,000)

- Luncheon (One Table for 10)
- Recognition at Luncheon
- 1/4 Page Color Ad in Event Program
- Sponsor Gift

### ☐ GIVE SPONSOR (\$1,000)

- Luncheon (for 2)
- Recognition in Event Program
- Sponsor Gift

### ☐ DREAM SPONSOR (\$10,000)

- Luncheon (Two Tables for 10)
- Recognition in Printed Materials
- 1/2 Page Color Ad in Event Program
- Sponsor Gift

### ☐ HOPE SPONSOR (\$2,500)

- Luncheon (for 10)
- Recognition at Luncheon and in Event Program
- Sponsor Gift

### ☐ ONE TABLE FOR 10 (\$1,500)

### ☐ LUNCHEON TICKET (\$150)

# of Tickets \_\_\_\_\_ X \$150 = \_\_\_\_\_

## PAYMENT INFORMATION

**Checks** made payable to "ST. JUDE CHILDREN'S RESEARCH HOSPITAL" **CHECK #** \_\_\_\_\_ **Amount** \_\_\_\_\_

**Charge** VISA MC DISCOVER AMEX **CARDHOLDER NAME** \_\_\_\_\_

**Credit Card #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

- ☐ I AM UNABLE TO ATTEND, PLEASE ACCEPT MY TAX-DEDUCTIBLE DONATION IN THE AMOUNT OF \_\_\_\_\_

FOR MORE INFORMATION CONTACT BONNE WHITTAKER AT 972.812.7100, FAX 972.812.7148, [BONNE.WHITTAKER@STJUDE.ORG](mailto:BONNE.WHITTAKER@STJUDE.ORG)  
This form can be submitted by mail, facsimile or by hand-delivery. To protect your credit card information, do not submit this form electronically through email.

**PAYMENT AND AGREEMENT MUST BE RECEIVED BY MARCH 10, 2017 TO BE INCLUDED IN THE PROGRAM**  
5800 Campus Circle Drive East, Ste. 108-A • Irving, Texas 75063 • [www.stjude.org/fortworth](http://www.stjude.org/fortworth)

**THANK YOU FOR SUPPORTING THE KIDS OF ST. JUDE!**