Mercy Memorial Hospital System
Office of Philanthropy, 718 N. Macomb St., Monroe, MI 48162
(734) 240-4487, fax (734) 240-4599

8th Annual Fantasy of Christmas Trees, November 10, 2012
at Monroe County Community College La-Z-Boy Center

SPONSORSHIP OPPORTUNITIES

All event proceeds benefit the Cancer Treatment Assistance Fund and the Monroe Cancer Center Healing Garden

_____**$3,000 –** ***Presenting Sponsor*** ($550 Fair Market Value-FMV)
Includes:
-6 VIP Reception and Gala reservations
-recognition on event invitation
-recognition in marketing and event publications

_____ **$2,000 –** ***Platinum Sponsor*** ($350 Fair Market Value-FMV)
Includes:
-4 VIP Reception and Gala reservations
-recognition on event invitation
-half-page program ad

_____ **$1,000 –** ***Gold Sponsor*** ($175 Fair Market Value-FMV)
Includes:
-2 VIP Reception and Gala reservations
-recognition on event invitation
-quarter-page program ad

_____**$1,000 -** ***Large Tree or other Auction Item Sponsor*** ($150 Fair Market Value-FMV)
Includes:
-2 VIP Reception and Gala reservations
-recognition with item

_____ **$500 –** ***Small Tree or other Auction Item Sponsor*** ($75 Fair Market Value-FMV)
Includes:
-2 Gala ONLY reservations
-recognition with item

_____ **$250 -** ***Friend of the Gala***
Includes listing in program

_____ **$50+ -** ***Silent Auction Sponsor***
I will donate a silent auction item valued at $50 or more.
Items must be dropped off to the Office of Philanthropy prior to November 2, 2012.

ITEM_____VALUE_____

_____**I would like information about donating to the Man Tree.**

_____**I have been contacted about donating to the Man Tree.**

Company Name:_____

Sponsorship Contact:_____ Title:_____

Address:_____City/State/Zip:_____

Phone:_____ Email:_____

Advertising Contact:_____Phone:_____

Email:_____

PAYMENT INFORMATION

_____My check made out to Mercy Memorial Hospital Corporation is enclosed.

_____I am paying with a credit card:

NAME as it appears on card:_____

ADDRESS (must include BILLING zip code):_____

PHONE:_(_____)_____

CARD TYPE: VISA MASTERCARD DISCOVER AMERICAN EXPRESS

CARD NUMBER:_____

SECURITY CODE:_____ EXPIRATION DATE:_____

SIGNATURE _____

Please remit payment with this form to: Mercy Memorial Hospital Corporation
Office of Philanthropy
718 N. Macomb St., GARDENS BLDG. C
Monroe, MI 48162

Questions? Please contact Deb Sieb, Philanthropy Coordinator, at (734) 240-4487.

Thank you for supporting Mercy Memorial Hospital Corporation!

Mercy Memorial Hospital Corporation is a non-profit organization under section 501(c)(3) of the Internal Revenue Code. Your contribution is tax deductible as provided by law.

****Please see enclosed information for additional details regarding tree sponsorship.****

*****All donor listings are subject to print deadlines.*****

Ad Sizes are: Half Page – 4.5"w x 3.5"h Quarter Page – 2"w x 3.5"h
Artwork must be black and white PDF or high resolution TIF 300 dpi submitted by October 17, 2012, please.

Additional Information Regarding Tree Sponsorship

1. Sponsorship money will be applied to a professionally decorated tree, other décor and/or other items as deemed appropriate by the event committee.

2. A limited number of large trees will be accepted. In order to secure tree sponsorship, it is recommended that payment is received well in advance of August 31, 2012. After this date, sponsorship money may be applied to other event needs. Appropriate sponsor recognition will be provided.

3. The first six sponsored trees (determined by date that payment is received) will be displayed with signage in the MMHS lobby approximately one month prior to the event.

4. The event committee reserves the right to assign a professional decorator for each tree. We cannot guarantee individual requests for decorator or theme.

5. Total value of tree or items will be equivalent to sponsorship amount.