



Hike for Hospice 2020
Sunday, May 3rd, 2020
Sponsorship Form

Thank you for your Support!

Please fill out the following and send to the attention of Amanda Tevelde at **Hospice Orillia**, 169 Front Street S., Orillia, ON L3V 4S8
 amanda@hospiceorillia.ca or fax (705) 325-7328 (upon receipt an invoice and confirmation will be emailed out)

COMPANY: _____

CONTACT: _____

MAILING ADDRESS: _____

CITY: _____ POSTAL CODE: _____

TELEPHONE: () - EXT: _____

EMAIL: _____ WEBSITE: _____

SELECTION	LEVEL	DESCRIPTION	PRICE	No. OF YEARS
	LEGACY	<ul style="list-style-type: none"> • Logo on event t-shirt (as Lead Sponsor) • Logo on event letterhead (as Lead Sponsor) • Opportunity to address participants • Opportunity to display promotional material • Signage displayed during the event • Listed as lead sponsor in media outreach • Listed as lead sponsor on event website • Listed as lead sponsor in event program 	\$5,000	
	COMPASSION	<ul style="list-style-type: none"> • Logo on event t-shirt (as Sponsor) • Opportunity to display promotional material • Signage displayed during the event 	\$1,000	
	FRIEND	<ul style="list-style-type: none"> • Logo on event t-shirt (as Sponsor) • Signage displayed during the event 	\$500	
	SUPPORTER	<ul style="list-style-type: none"> • Signage displayed during the event 	\$250	
	OTHER	<ul style="list-style-type: none"> • Donation of your choice to Hike for Hospice 	\$ _____	

By signing below, I am confirming that I have the authorization to enter into this agreement with Hospice Orillia and Mariposa House Hospice and that Hospice Orillia and Mariposa House Hospice has the permission of my organization to use its logo on Hike for Hospice promotional purposes as outlined in the sponsorship package. Please email your logo jpeg or png format for best results on promotional materials. All logos must be received by **March 1, 2020**

Name: _____ Signature: _____ Date: _____