

MGM Grand Hotel, Detroit Saturday, March 14, 2015

SPONSORSHIP AND AD COMMITMENT FORM

Name:			
Company:			
Address:		City:	State:Zip:
Business Contact:		E-Mail:	
Phone Number:			
Sponsorships: ☐ \$25,000 Marquee	Ads: (horizontal)	Component Sponsors:	
☐ \$10,000 Crystal ☐ \$ 5,000 Diamond	□ \$1,000 Full (4.75"w x 7.75h") □ \$ 750 1/2 (4.75"w x 3.875"h) □ \$ 500 1/4 (3.375"w x 3.875"h) □ \$ 250 Listing		☐ \$3,000 Photography ☐ \$3,000 Afterglow Lounge ☐ \$2,000 Favors
Please reserve your sponsorship early. If you would like information regarding individual tickets in advance of the invitation, please contact the Foundation office at 586/741-4330.			
Ad Copy: Same as Last Year New Copy (ALL AD COPY MUST BE RECEIVED BY FEBRUARY 16, 2015) if we do not receive your ad copy by the deadline, an ad will be created using your BUSINESS NAME ONLY).			
Payment Method (Check or Credit Card Accepted):			
Payment Enclosed:	YesNo, please invoice me.	Amount: \$	
Please check: ☐ Visa	☐ Mastercard	☐ Discover ☐ America	an Express
Credit Card #		Exp. Date:	Security Code:
Name on Card:			
Signature:			

Make checks payable to: **McLaren Macomb Healthcare Foundation.** Commitments must be received by February 9, 2015 or you may register on-line at www.mclaren.org/macombevents.

Send sponsorship commitment and ad copy to:

McLaren Macomb Healthcare Foundation, 1000 Harrington, Mt. Clemens, MI 48043 or fax to 586/741-4340. Questions, please call: 586/741-4330 or email louise.rallis@mclaren.org. All ads should be submitted electronically to the email below in one of the following forms: Illustrator, Photoshop or EPS or PDF file. Black and white advertising only, no bleeds.

McLaren Macomb Healthcare Foundation is a public foundation with exemption status under 501(a) of the Internal Revenue Code as described in Section 501(c)(3) for charitable organizations.

Federal Tax I.D. number 38-2578873

