

# **SPONSORSHIP & ANNUAL GIFT FORM**

### FRIDAY, OCTOBER 16, 2020

ROCHESTER RIVERSIDE CONVENTION CENTER WWW.STANNSCOMMUNITY.COM/FOODFIGHT

## YES! We would like to show our corporate support ...

At the following EVENT SPON	NSORSHI	P leve	el:		
PALATE PLEASING PRESENTING	\$25,000			GLAZED GOLD	\$5,000
PICKLED PLATINUM	\$15,000			SIZZLING SILVER	\$3,500
Exquisite Emerald	\$10,000			BUBBLING BRONZE	\$1,600
DELICIOUS DIAMOND	\$7,500				
At the following SIGNATURE	SPONSO	RSHII	P level:		
KITCHEN	\$7,500			CHAMPAGNE	\$3,500
COCKTAIL RECEPTION	\$7,500			Dessert	\$2,500
Mystery Basket	\$5,000			CENTERPIECE	\$2,500
WINE	\$3,500			St. Ann's Staff Table	\$1,600
By purchasing TICKETS or T	`ABLES				
NUMBER OF TICKETS		X	\$200	Total =	\$
NUMBER OF PATRON TICKETS		X	\$250	TOTAL =	\$
TABLE FOR 10 GUESTS		X	\$2,000	TOTAL =	\$
PATRON TABLE FOR 10 GUESTS		X	\$2,500	TOTAL =	\$
With a fully tax deductible A	NNUAL	GIFT	of	<b>\$</b>	
(No Food Fight Benefits)				<u> </u>	(over)

#### **PAYMENT INFORMATION**

COMPANY INFORMATION

Please provide payment information below. Alternatively you can purchase your sponsorship and make your annual gift online at **www.stannscommunity.com/foodfight.** To be included in our printed promotional material your commitment is needed by **June 30, 2020.** 

All Corporate Partners supporting St. Ann's Community with a Sponsorship or with an Annual Gift (\$1,000 and above) receive year-round recognition and invitations to our Salute to Philanthropy Donor Recognition Event and Employee Scholarship Awards Ceremony.

COMPANY NAME:					
_	As you wish to app	ear online and in printed p	ublications		
CONTACT NAME:					
TITLE:					
ADDRESS:					
CITY/STATE/ZIP:					
PHONE:					
EMAIL:					
MENT METHOD					
<u> </u>		\$	Please make	e check payable to St	Ann's Foundati
MENT METHOD  CHECK ENCLOSED IN THE AN	Е, 2020	\$ \$	_ Please make	e check payable to St.	Ann's Foundati
MENT METHOD  CHECK ENCLOSED IN THE AN PROVIDE AN INVOICE IN JUNI	E, 2020 <b>CARD</b> FOR		Please make	e check payable to St Master Card	Ann's Foundati Visa
MENT METHOD  CHECK ENCLOSED IN THE AN PROVIDE AN INVOICE IN JUNI PLEASE CHARGE MY CREDIT	E, 2020 <b>CARD</b> FOR	\$	-		
MENT METHOD  CHECK ENCLOSED IN THE AN PROVIDE AN INVOICE IN JUNI PLEASE CHARGE MY CREDIT CREDIT CARD TYPE (please c	E, 2020 <b>CARD</b> FOR	\$	-		Visa
MENT METHOD  CHECK ENCLOSED IN THE AN PROVIDE AN INVOICE IN JUNIO PLEASE CHARGE MY CREDIT CREDIT CARD TYPE (please concredit CARD NUMBER	E, 2020 CARD FOR ircle)	\$	-	Master Card	Visa

#### Please return this form and commitment in the enclosed envelope to:

St. Ann's Foundation, 1500 Portland Avenue, Rochester NY 14621

For more information, visit www.stannscommunity.com/foodfight or call 585-697-6515

