

Benefit	Year-long Sponsor Packages			Gala Specific Sponsorship	
	\$20,000	\$10,000	\$5,000	\$3,000	\$1,000
Special recognition and acknowledgement at Gala Event	X	X	X	X	X
Gala Invitation - Name listed on invitation					X
Gala signage - Name listed on signage and presentation					X
Event tickets - 2 complimentary tickets to Gala Event					X
Website - Name listed on Gala page	X	X	X		X
Gala invitation - Logo listed on invitation	X	X	X	X	
Gala signage - Logo instead of name on signage/slides	X	X	X	X	
Event tickets - 4 total complimentary tickets to Gala Event				X	
Website - Logo instead of name listed on Gala page	X	X	X	X	
Website -Name listed on Sponsorship Page	X	X	X		
Enews - Name included as sponsor (670 sent quarterly)	X		X		
Print Newsletter - Name listed as sponsor (1,000 printed annually)	X		X		
Annual Report - Name listed as sponsor (2,500 printed)		X	X		
Donor Boards in health center - Name listed as sponsor	X	X	X		
Facebook - Exclusive post sharing company's Facebook Page (currently 800 likes)	X	X	X		
Ads - Name included in sponsorship ad			X		
Event tickets - 6 total complimentary tickets to events			X		
Event invitations - Name listed on invitations for any events (800 mailed)		X	X		
Annual Staff Meeting - Name on Sponsor Slide (250 people)		X	X		
Enews - Logo instead of name included as sponsor (670 sent quarterly)	X	X			
Print Newsletter - Logo instead of name included in newsletters (1,000 printed)	X	X			
Facebook - Banner takeover of UCNW Facebook for a week (currently 800 likes)	X	X			
Twitter - Special feature tweet with logo	X	X			
Ads - Logo Included in specific sponsorship appreciation ads	X	X			
Event tickets - 8 total complimentary tickets to events		X			
Event invitations - Logo included on invitations for any events (670 mailed)	X				
Event tickets - 10 total complimentary tickets to events	X				
Twitter - Banner takeover of our Twitter page for a week	X				
Website - Your "Donor Story" featured on front page for a month	X				
Enews - Special article/donor Story feature in our Enews (670 sent)	X				
Annual Report - Logo instead of name displayed as sponsor (2,500 printed)	X				
Annual Staff Meeting - Logo instead of name on Sponsor Slide (250 people)	X				

Health Care Champions Sponsorship Program



Contact Information:

Organization Name: _____

Contact Person: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

Phone: _____ Email: _____

Organization Name for Recognition Purposes (if different from above):

Year-long Sponsor Packages*

_____ \$20,000

_____ \$10,000

_____ \$5,000

Gala Specific Sponsorship Packages*

_____ \$3,000

_____ \$1,000

Commitment due by end of June

Gala will take place on a Friday in Sept.

___ My organization would like to pay the entire amount in a single payment.

___ My organization would like to pay in _____ installments

Payment amount \$ _____

Payment Method:

___ Check or money order payable to Unity Care NW is enclosed.

___ Credit card - go online to UnityCareNW.org/donate

Return completed form to: Tamara Tregoning

Tamara.Tregoning@ucnw.org

(360) 788-2628

1616 Cornwall Avenue Ste 205, Bellingham, WA 98225

A portion of your gift may be tax deductible as specified by IRS regulations.
Unity Care NW is a tax-exempt 501(c)(3) organization, Tax ID # 91-2168190.

*Sponsorship packages come with benefits including levels of acknowledgement, recognition, and event tickets but are not connected to patient referrals or business agreements. UCNW is in full accordance with the Federal Anti-Kickback Statute and Regulations: 42 U.S.C. § 1320a-7b(b); 42 C.F.R. § 1001.952.