



Corporate Sponsorship Registration Form

EVENT

24th Annual Ambassadors of Hope Dinner and Dance Gala

Date: Saturday, April 1, 2017 @ 7:00 PM

Grand Prospect Hall, Brooklyn, NY

Please complete the Corporate Sponsorship Form

I, _____ of _____ pledge my support and will be attending the 24th Annual Ambassadors of Hope Dinner and Dance (please check appropriate box below.)

Sponsorship Levels

Sponsorship Value

- Diamond -- 15,000

Lead Sponsor of the 24th Annual Ambassadors of Hope Dinner and Dance Gala (a portion of your donation will cover the cost of SCTPN's annual family fun day).

- **Platinum**-- \$10,000

Co-Sponsor of the 24th Annual Ambassadors of Hope Dinner and Dance Gala (a portion of your donation will provide monetary assistance to clients who face financial hardship).

- **Gold**-- \$7,500

Support Sponsor for the 24th Annual Ambassadors of Hope Dinner and Dance Gala (a portion of your donation will sponsor patients want to attend the event).

- **Silver** -- \$5,000

Benefactor for the 24th Annual Ambassadors of Hope Dinner and Dance Gala (a portion of your donation will cover cost of entertainment and photography for the even..)

- **Bronze** - \$3,000

Patronage for the 24th Annual Ambassadors of Hope Dinner and Dance Gala (a portion of your donation will be used to purchase metro cards for clients that meet our criteria).

I, _____ of _____ pledge my support at the level of \$ _____, but will not be attending the 24th Annual Ambassadors of Hope Dinner & Dance Benefit.

I am unable to become a sponsor of the 24th Annual Ambassadors of Hope Dinner and Dance Gala but have enclosed a donation in the amount of \$ _____ to support the Sickle Cell Thalassemia Patients Network's scholarship, education and outreach programs.

Responses must be mailed by February 28, 2017 to:

***Esme Hilman, Dinner Dance, Co-Chair
Sickle Cell Thalassemia Patients Network
1139 St. Johns Place, Brooklyn, NY 11213-2617***

You can also send your response by email to Esme.Hilman@sctpn.net or fax (718) 789-5767. **Please make check payable to: Sickle Cell Thalassemia Patients Network or pay online.**

All contributions are tax deductible.