



SPONSORSHIP CONFIRMATION FORM

FAX (425) 899-1904 | EMAIL mepowers@evergreenhealth.com

Count us in! We want to join others in the community in supporting the **2019 Evergreen Gala**, one of the most successful single-night benefits on the Eastside.

- Yes, our company wants to be a **DIAMOND** Sponsor (\$25,000)
- Yes, our company wants to be a **PREMIER** Sponsor (\$20,000)
- Yes, our company wants to be a **PLATINUM** Sponsor (\$15,000)
- Yes, our company wants to be a **GOLD** Sponsor (\$10,000)
- Yes, our company wants to be a **SILVER** Sponsor (\$7,500)
- Yes, our company wants to be a **BRONZE** Sponsor (\$6,000)
- Yes, our company would like to make an underwriting donation in the amount of \$_____ and sponsor _____ at the Evergreen Gala.

We are unable to be a Gala Sponsor this year, but will support this important cause by making a cash donation in the amount of \$_____.

Please print your company name as you would like it to appear on Gala materials:

COMPANY/INDIVIDUAL NAME _____
CONTACT NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____ EMAIL _____

MAKE CHECKS PAYABLE TO:
EvergreenHealth Foundation
12040 NE 128th Street, MS #5, Kirkland, WA 98034-3013

- PAYMENT METHOD:**
- Check enclosed in the amount of \$_____/ check to follow
 - Please provide an invoice in (month/year) _____
 - Please charge the amount of \$_____ to
 - VISA MasterCard Discover American Express

Credit Card #: _____ Exp. Date: _____
Name as it appears on the card: _____
Signature: _____

For more information, contact Meg Powers at (425) 899-1903.