

MERCY MEDICINE FREE CLINIC'S ANNIVERSARY GALA

SPONSORSHIP RESPONSE FORM



**Thank you for sponsoring the Silver Anniversary Gala
for
Mercy Medicine Free Clinic!**

**The Water's Building
Thursday, October 17, 2019 | 7-11 pm**

Sponsorship Levels:

| | |
|----------------------|------------------------------------|
| Grand Sponsor | \$10,000 • 10 event tickets |
| Platinum | \$ 5,000 • 8 event tickets |
| Gold | \$ 2,000 • 6 event tickets |
| Silver | \$ 1,000 • 4 event tickets |
| Bronze | \$ 500 • 2 event tickets |

Please return this form by August 15, 2019

to

**Mercy Medicine Free Clinic
500 S Coit Street Florence, SC 29501
Email: arlene.lavigne@mercymedicine.org**

Reservation Form

(Please check your selection):

Grand Sponsor ___ Platinum ___ Gold ___ Silver ___ Bronze ___

Organization/Company/Name (as you would like it listed):

Address/City/Zip: _____

Contact Person & Title: _____

Email: _____ **Phone:** _____

___ Sorry, we are unable to participate as a sponsor this year, but we have enclosed a tax deductible donation to Mercy Medicine Free Clinic.

For Office Use Only: Date Received: _____

Date Processed: _____ **Date Acknowledged:** _____