



## 2019 5k Walk/Run Sponsorship Opportunities

Saturday, September 28, 2019

### **FINISH LINE \$5,000.00**

- Company logo on finish line banner, back of T-shirt, signage at event, 5K website
- 10 Participants and 10 T-shirts
- Recognition from Stage
- Opportunity to distribute promotional items at event

### **REGISTRATION TENT \$5,000.00**

- Company logo on registration tent banner, back of T-shirt, signage at event, 5K website
- 10 Participants and 10 T-shirts
- Recognition from Stage
- Opportunity to distribute promotional items at event

### **SURVIVOR TENT \$3,500.00**

- Company logo on survivor tent banner, back of T-shirt, signage at event, 5K website
- 8 Participants and 8 T-shirts
- Recognition from Stage
- Opportunity to distribute promotional items at event

### **MARATHONER \$2,500.00**

- Company logo on back of T-shirt, signage at event, 5k website
- 6 Participants and 6 T-shirts
- Recognition from Stage
- Opportunity to distribute promotional items at event

### **JOGGER \$1,000.00**

- Company Logo on back of T-shirt and signage at event
- 4 Participants and 4 T-shirts
- Recognition from Stage
- Opportunity to distribute promotional items at event

### **WALKER \$500.00**

- Company Logo on back of T-shirt and signage at event
- 2 Participants and 2 T-shirts
- Recognition from Stage

*Proceeds from the 5K will continue to support patient care as well as the purchase of technological advances in our Radiation Oncology department.*

*Our mission is to provide exceptional cancer care that is comprehensive, comforting and close to home.*

# 2019 Sponsorship Reply Form

Saturday, September 28, 2019

Yes, I will support the Griffin 5K!

- Finish Line \$5,000.00
- Registration Tent \$5,000.00
- Survivor Tent \$3,500.00
- Marathoner \$2,500.00
- Jogger \$1,000.00
- Walker \$500.00



Name \_\_\_\_\_  
Company \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

My gift is in honor of \_\_\_\_\_  
My gift is in memory of \_\_\_\_\_

My team name is \_\_\_\_\_

Names of participants:

- I have enclosed a check for \$ \_\_\_\_\_
- Please charge my credit card \$ \_\_\_\_\_

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_
- 5 \_\_\_\_\_
- 6 \_\_\_\_\_
- 7 \_\_\_\_\_
- 8 \_\_\_\_\_
- 9 \_\_\_\_\_
- 10 \_\_\_\_\_

- MasterCard
- VISA
- AMEX

Name on card \_\_\_\_\_  
Billing Address \_\_\_\_\_  
\_\_\_\_\_   
Card number \_\_\_\_\_  
Expiration \_\_\_\_\_ Security code \_\_\_\_\_

Contact us at 203-732-7466 or [5kwalkrun@griffinhealth.org](mailto:5kwalkrun@griffinhealth.org) with any questions.

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