

YOUR SPONSORSHIP WILL MAKE A DIFFERENCE IN THE LIVES OF LOCAL CHILDREN WITH CANCER

Attached please find a sponsorship level options page and an informational brochure.

14th Annual Light the Way Dinner Auction

American Childhood Cancer Organization Inland Northwest

The Davenport Grand Hotel

April 27, 2018

Silent Auction begins at 6:00 PM

American Childhood Cancer Organization is a 501(c)3 non-profit that enhances the lives of young cancer patients and their families during very difficult times. For more information, please visit our website at www.acco.org/inlandnw.

Sincerely,

Sarah Jane Brown and Kiersten Barron

2018 Light the Way Chairpersons

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... because kids can't fight cancer alone!®

Sponsorship Levels

□ Presenting Sponsor - \$8,500

- Your company's logo prominently displayed on posters, invitations, and event programs (if sponsorship commitment received prior to print dates)
- Your company's name and logo displayed on our website, Facebook page and newsletter
- Sponsor recognition in media promotions
- Premier Seating for sixteen (two tables of eight) with name displayed at tables
- Sponsor logo on video screen
- Recognition at event

□ Gold Ribbon Sponsor - \$6,000

- Your company's name and logo displayed on our website, Facebook page, newsletter and program
- Sponsor recognition in media promotions
- Premier Seating for eight with name displayed at table
- Sponsor logo on video screen
- Recognition at event

□ Silver Ribbon Sponsor - \$3,500

- Your company's name displayed on our website, Facebook page, newsletter and program
- Sponsor name on video screen
- Premier Seating for eight
- Recognition at event

□ Bronze Ribbon Sponsor - \$1,500

- Your company's name listed on our website, Facebook page, newsletter and program
- Table for eight
- Recognition at event

Ticket Purchase: I am not able to sponsor, be table for eight is \$800. Reserve your tickets not		
☐ I am not able to attend, but would like to contri	ibute	
Company Name:		
Contact Name:		
Address/City/State/Zip:		
Email:	Phone:	
Method of Payment □Visa □Master Card		
Card Number:	Expr. Date:	CVV Code
Name on Card:		