## 2024 NICU TEA AND LUNCHEON SPONSORSHIP COMMITMENT FORM



Company/Donor Name			
Main Contact Name			
Mailing Address			
City	State		Zip
Business Phone	Email		
I wish to support the NICU Tea Luncheon at the level indicated below:  SPONSORSHIP OPPORTUNITIES			
Universe   \$100,000	Supernova   \$50,000	Galaxy   \$25,000	Constellation   \$15,000
Lunar   \$10,000	Comet   \$6,000	Shining Star   \$3,500	
Individual Ticket   \$300	Under 10   \$150		
I/we are unable to attend. Please accept this donation in the amount of \$			
UNDERWRITING OPPORTUNITIES			
Printing   \$5,000	Decorations   \$5,000	Auction Paddles   \$5,000	
Marketing   \$5,000	Favors   \$5,000	Sponsor a NICU Nurses Table   \$6,000	
PAYMENT OPTIONS			
Credit Card payments and register online at www.HonorHealthFoundation.org/nicu-lunch			
Please invoice me			
Wire Transfer (ACH) (please ask for transmittal instructions)			
Check Enclosed (Payable to HonorHealth Foundation - Attention: NICU Tea Luncheon)  Mail to: HonorHealth Foundation, 8125 N. Hayden Road, Scottsdale, AZ 85258			
By signing below, you authorize the payment or charge(s) and agree to fulfill the terms of this HonorHealth Foundation sponsorship commitment			
Signature		Da	nte