



TOASTING HOPE

TASTING EVENT

Benefiting the Epilepsy Foundation of Michigan

September 28, 2017 | The Townsend Hotel | Birmingham, MI | 6:30 PM

Platinum Toasting Sponsor

\$10,000

This exclusive sponsorship entitles you and/or your company to the following:

- 12 tickets to the event
- Prominent logo placement on photography display backdrop at event
- Limousine transportation for 12 people to and from one address for event
- Private pre-tasting opportunity for 12 to taste wines prior to guest arrival
- On-stage presence and introduction during the evening's "Toast to Hope," led by the Toasting Hope Event Chair
- Inclusion in the Toasting Hope media campaign:
 - Invitation, Press Release, Social Media Outlets
- Full-color logo featured on:
 - Event AV program, event website, event program, event mobile bidding site
- Reserved table for 12 with premium seating
- Mention from event podium

Gold Sponsor

\$5,000

This sponsorship entitles you and/or your company to the following:

- 6 tickets to the event
- Logo placement on photography display backdrop at event
- Limousine transportation for 6 people to and from one address for event
- Sponsor name featured on:
 - Event AV program, event website, event program, event mobile bidding site
- Reserved table for 6
- Mention from event podium

Silver Sponsor

\$2,500

This sponsorship entitles you and/or your company to the following:

- 4 tickets to the event
- Sponsor name featured on:
 - Event AV program, event website, event program, event mobile bidding site
- Reserved high-top with seating for 4
- Mention from event podium

Bronze Sponsor

\$1,000

This sponsorship entitles you and/or your company to the following:

- 2 tickets to the event
- Sponsor name featured on:
 - Event AV program, event website, event program

Sponsorship Agreement Form

I would like to participate at the following level:

- \$10,000 Platinum Toasting Sponsor
- \$5,000 Gold Sponsor
- \$2,500 Silver Sponsor
- \$1,000 Bronze Sponsor

The following action needs to be taken:

- Please accept the enclosed check, made out to the Epilepsy Foundation of Michigan
- Credit Card

Credit Card # _____

Exp. Date: _____ Name on Card: _____

- I am unable to attend at this time, but will make a contribution of: \$_____

Please Complete:

Company Name: _____ Contact: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Please return the completed form to:
Epilepsy Foundation of Michigan
Attn: Accounting Department
25200 Telegraph Road, Suite 110
Southfield, MI 48033

If you have any questions regarding the Toasting Hope Tasting Event or sponsorship opportunities, please contact Andrea Schotthoefer, Development Manager at (800) 377-6226, ext. 1231 or by email at aschott@epilepsymichigan.org.

