



SPECIAL SPONSOR FORM

COMPANY NAME AND CONTACT PERSON: _____
 MAILING ADDRESS: _____
 LOCAL PHONE: _____ CELL PHONE: _____
 FAX NUMBER: _____ E-MAIL: _____

DONATION AMOUNT (Please check one):

***SPONSORSHIP LEVELS ABOVE \$2,500 WILL BE HANDLED ON AN INDIVIDUAL BASIS. FOR MORE INFORMATION, PLEASE CONTACT THE FOUNDATION OFFICE AT (985) 340-0860.**

_____	MAD HATTER	\$2,500	<i>14 Gala tickets, individual reserved table and sponsor recognition</i>
_____	WHITE RABBIT	\$1,500	<i>10 Gala tickets, shared table and sponsor recognition</i>
_____	CHESHIRE CAT	\$1,000	<i>8 Gala tickets and sponsor recognition</i>
_____	MARCH HARE	\$ 500	<i>4 Gala tickets and sponsor recognition</i>
_____	DORMOUSE	\$ 125	<i>Individual ticket</i>
_____	MOCK TURTLE	\$1,000	<i>Car Raffle pre-sale includes 2 Gala tickets and reserved seating</i>

NOTE: A maximum of 25 tickets will be sold

ALL SPECIAL SPONSORS WILL RECEIVE SPECIAL SPONSOR AMENITIES, AS WELL AS DESIGNATED SEATING AT THE EVENT BASED UPON DONATION LEVEL. IN ADDITION, ALL SPONSORS WILL RECEIVE RECOGNITION THROUGH PRESS AND MEDIA.

PAYMENT:

_____ Check Enclosed
 _____ Mail Invoice _____ (Please indicate desired mail date)
 _____ Monthly
 _____ Quarterly

_____ Charge (Please indicate)
 _____ Visa
 _____ Mastercard

Preferred Transaction Date: _____

Information as it appears on card:

Name: _____

Card Number: _____

Expiration Date: _____

Billing Address: _____

PLEASE COMPLETE THIS FORM AND RETURN TO:

Richard Murphy Hospice Foundation
1109 S. Chestnut St.
Hammond, LA 70403
or fax to: (985) 340-0862