



Saturday, May 5, 2018 Wailoa State Park 14th Annual Celebration of Life Sponsorship Form

Please complete and mail, email or fax to Hawai'i Care Choices by March 15, 2018 Email: fkwee@hawaiicarechoices.org Fax: (808) 961-7397

Koa Sponsor \$3,500 and above

- Primary Mention in radio advertisements and PSAs
- Primary Mention and Logo on all published materials (Social Media, Newspaper, flyers, and Posters)
- Business Banner displayed on stage at event (provided by donor)
- Logo on Event T-shirt

Ōhi'a Lehua Sponsor \$1,500-\$3,499

- Honorable Mention in radio advertisements and PSAs
- Honorable Mention and logo on all published materials (newspaper, flyers, and posters)
- Business Banner displayed at event (provided by donor)
- Logo on Event T-shirt

Lama Sponsor \$500-\$1,499

- Business Banner displayed at event (provided by donor)
- Business Name on Event T-shirt



□ Koa Spon	sor □ Ōhi'a Lehua S	ponsor 🗆 Lama S	Sponsor
I will contribute: \$			
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Company Name:			
	Phone:		
Email Address:		· · · · · · · · · · · · · · · · · · ·	
Address:			
City:	State:	Zip Code:	
Checks should be made payable	e to: Hawaiʻi Care Choices		
Credit Card: Please charge my (circle one) V	isa or MasterCard #:		Exp:
Billing Address (if different from	m provided above):		