

INTEGRIS Gala

BENEFITING PEDIATRIC SERVICES

BE A SPONSOR

Yes! I would like to be a sponsor of the INTEGRIS Gala benefiting Pediatric Services on April 7, 2017. Please secure my sponsorship at the following level:

- Gold Sponsor, \$5,000
 Silver Sponsor, \$2,500
 Bronze Sponsor, \$1,000
 Other _____ \$

- Please accept my additional donation to support Pediatric Services for the following amount: \$

My Total Gift Amount \$

Name

Organization Name

How should your name be listed in sponsorship listing?

Address

Preferred Phone Number

Preferred E-mail Address

- Please check here if you wish to not be included in the sponsorship listing.

VIEW FULL SPONSORSHIP BENEFITS INSIDE GALA SPONSORSHIP BROCHURE

SEATING INFORMATION

If possible, I would prefer to be seated with the following guests:

I am a sponsor for the 2017 INTEGRIS Gala. The following guests will be attending under my sponsorship level:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

PAYMENT INFORMATION

Check enclosed for: \$ _____

Please make check payable to INTEGRIS Foundation.

Charge my credit card for: \$ _____

Credit card number Exp. date

Card holder name (please print)

Card holder signature

Please return completed form to INTEGRIS Foundation
3030 NW Expressway, Suite 1600 / OKC, OK 73112

REGISTER ONLINE!

INTEGRISGIVING.ORG/GALA