



## 2018 Gala Sponsor Information

Company Name:		
Contact Name:		
Mailing Address:		
City:	State:	Zip:
Telephone:	Fax:	
Email Address:		
<p>Yes, we want to support Lawrence General Hospital and the 2018 Legacy of Caring Gala:</p> <p><input type="checkbox"/> Gold Sponsor - \$10,000</p> <p><input type="checkbox"/> Silver Sponsor - \$5,000</p> <p><input type="checkbox"/> Bronze Sponsor - \$2,500</p>		
Signature:		Date:
<p>Sponsorship Payment:</p> <p><input type="checkbox"/> Enclosed is a check made payable to "Lawrence General Hospital"</p> <p><input type="checkbox"/> Please invoice me (payment due by August 1, 2018)</p> <p><input type="checkbox"/> If you would like to pay by credit card, please call 978-946-8121</p>		
Gold Sponsor Guests (seating for 10):		
Silver Sponsor Guests (seating for 10):		
Bronze Sponsor Guests (seating for 6):		

Please return this form at your earliest convenience, by no later than August 1, 2018.  
**Thank you for supporting Lawrence General Hospital's mission of providing high-quality, high-value health care, close to home.**

**So good. So caring. So close.**