



**Event Underwriting & Sponsorship Opportunities**  
 Register or make a gift online at [www.thrivewomensclinic.com/Festa](http://www.thrivewomensclinic.com/Festa)

*Thrive In Your Season • Thursday, March 29, 2018; 10am – 12pm • Rosine Hall at The Dallas*

**Champion of Life (\$25,000+)**

- Premier table(s) for ten to twenty
- Recognition in event-related materials
- 20 copies of *She's Still There* by Chrystal Hurst

**Guardian of Life (\$10,000+)**

- Prominent table for ten
- Recognition in event-related materials
- 10 copies of *She's Still There* by Chrystal Hurst

**Defender of Life (\$5,000+)**

- Distinguished table for ten
- Recognition in event-related materials
- 5 copies of *She's Still There* by Chrystal Hurst

**Sustainer of Life (\$2,500)**

- Excellent table for ten
- Recognition in event-related materials
- 2 copies of *She's Still There* by Chrystal Hurst

**Preserver of Life (\$1,500)**

- Table for ten
- Recognition in event-related material
- 1 copy of *She's Still There* by Chrystal Hurst

**Patron Sponsor (\$1,000)**

- Priority seating for 2
- Recognition in event-related materials
- 1 copy of *She's Still There* by Chrystal Hurst



Enhancing Trust

Thrive Women's Clinic is a 501(c)(3) organization. If you are attending this event, the nondeductible portion of your payment will be reflected on your receipt.

**EVENT SPONSORS** (these options do not fill a table)

**Venue Sponsor (\$5,000)**

**Sponsor a Life-Saving Story on Film (\$2,500)**

- Priority Seating for one or two if attending event
- Recognition in event-related materials
- 2 copies of *She's Still There* by Chrystal Hurst

**In order to receive recognition in event-related materials, underwriting contract must be received no later than March 15th.**

- \_\_\_\_\_ I am unable to attend but wish to contribute \$\_\_\_\_\_ to Thrive Women's Clinic.  
 \_\_\_\_\_ I decline all underwriting benefits; the total amount of my gift will be tax deductible.  
 \_\_\_\_\_ I wish my gift to be anonymous.

**Name for Recognition:** \_\_\_\_\_  
 (as it should appear in event-related material)

**E-mail:** \_\_\_\_\_  
 (please print legibly)

**Cell:** \_\_\_\_\_ **Church:** \_\_\_\_\_

**Payment Options:** \_\_\_\_\_ Enclosed is my check for \$\_\_\_\_\_ made payable to Thrive Women's Clinic.  
 \_\_\_\_\_ Please charge \$\_\_\_\_\_ to my MC Visa AMEX (circle one).

**Name on Card:** \_\_\_\_\_

**Credit Card Acct. No:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **CVV2 (code) :** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_ **City/State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_