



# 007<sup>th</sup>

## LICENSE TO GIVE

# 2026 Hands of Hope Gala

◆ 7TH ANNUAL GALA ◆

OCTOBER 9, 2026 | WINMOCK AT KINDERTON

## ◆ SPONSOR COMMITMENT FORM ◆

### ◆ SPONSOR INFORMATION ◆

Sponsor Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### ◆ TICKET PREFERENCE ◆

- ☐ I will use my sponsor tickets.
- ☐ I will not use my sponsor tickets.

### ◆ PAYMENT INFORMATION ◆

Amount Enclosed: \$ \_\_\_\_\_

Payment Method:

- ☐ Check (Payable to: Hands of Hope Medical Clinic)
- ☐ Other: \_\_\_\_\_

Signature: \_\_\_\_\_

### ◆ SPONSORSHIP LEVEL ◆

- ☐ **MI6 EXECUTIVE SPONSOR** ..... \$15,000
- 12 Gala tickets • 8 VIP Reception tickets • Speaking opportunity during program
  - Premier logo placement on all event materials
  - Full-page program recognition • Recognition on website and social media
- ☐ **DOUBLE-O AGENT SPONSOR** ..... \$10,000
- 10 Gala tickets • 6 VIP Reception tickets • Premium logo placement
  - Full-page program recognition • Website and social media recognition
- ☐ **GOLDFINGER SPONSOR** ..... \$5,000
- 8 Gala tickets • 4 VIP Reception tickets • Logo on event signage
  - Full-page program recognition
- ☐ **SECRET INTELLIGENCE SPONSOR** ..... \$2,500
- 6 Gala tickets • 2 VIP Reception tickets
  - Half-page program recognition
- ☐ **SECRET AGENT SPONSOR** ..... \$1,000
- 4 Gala tickets • Program recognition
- ☐ **FIELD OPERATIVE SPONSOR** ..... \$500
- 2 Gala tickets • Program recognition

### ◆ Specialty Sponsorship Opportunities ◆

- ☐ **LICENSE TO POUR SPONSOR** ..... \$2,000
- Exclusive recognition at the bar • Logo on bar signage
  - Recognition in program
- NO TICKETS INCLUDED WITH THIS SPONSORSHIP**
- ☐ **BOND EXPERIENCE PHOTO BOOTH SPONSOR** .... \$1,200
- Exclusive recognition at the photo booth • Logo on signage
  - Recognition in program
- NO TICKETS INCLUDED WITH THIS SPONSORSHIP**

### ◆ IN-KIND DONATION INFORMATION ◆

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_

◆ PLEASE RETURN COMPLETED FORM AND PAYMENT TO: ◆

Hands of Hope Medical Clinic  
PO Box 62  
Yadkinville, NC 27055

EIN: 27-5569145  
Hands of Hope Medical Clinic  
is a registered 501(c)(3) nonprofit.

✉ Email business logos to: [admin@hohclinic.org](mailto:admin@hohclinic.org)

☎ 336-849-7960

✉ [admin@hohclinic.org](mailto:admin@hohclinic.org)

🌐 [www.hohclinic.org](http://www.hohclinic.org)



◆ Thank you for your generous support! ◆