



Presented by:

Learn more at [childhealth.ca](http://childhealth.ca)

By supporting Children's Health Foundation, you are helping a dedicated and compassionate team of health care professionals care for children and youth from across the region. You are helping to save and improve kids' lives.

For more information about Bowling for Miracles contact:  
Justyna Pawlowska, Financial Institutions Work Team, Co-Chair  
justyna.pawlowska@td.com or 519-451-1910 ext. 249



Jack, age 15

*In support of Children's Health Foundation*

# Sponsorship Opportunities

**Sunday, April 8, 2018**

Fleetway Bowling Centre, London



# Sponsorship Opportunities



Select a sponsorship option (check one):

**STRIKE OUT - \$1,500**

- Invitation to be part of opening ceremonies
- Name announced during event
- Sponsorship signage on every lane
- Recognition on event sponsorship board
- Logo on event web site

**TURKEY - \$1,000**

- Name announced during event
- Sponsorship signage on every lane
- Recognition on event sponsorship board
- Logo on event website

**STRIKE - \$500**

- Name announced during event
- Sponsorship signage on every lane
- Recognition on the event sponsorship board
- Name on event web site

**SPARE - \$200**

- Sponsorship signage on every lane
- Recognition on the event sponsorship board
- Name on event web site

**LANE - \$100**

- Sponsorship signage on every lane
- Name on event web site

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## PRIZE DONATION (prize donors will be recognized ON PRIZE TABLES)

I would like to donate a prize to the Children's Bowling for Miracles event.

Prize: \_\_\_\_\_

Prize Value: \_\_\_\_\_

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## CASH DONATION (eligible for tax receipt)

I would like to make a donation of \$ \_\_\_\_\_

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**COMPANY NAME IN FULL** \_\_\_\_\_

Name of Company: \_\_\_\_\_  
(as it is to appear for acknowledgement if different from above)

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

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ PC: \_\_\_\_\_

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

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

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

Return your completed form, cheque or prize to your branch representative by **THURSDAY, MARCH 15, 2018** to ensure proper recognition. Please make all cheques payable to Children's Health Foundation.

