



Event Donation Form

Health Care Network, Inc. Presents:



A Ladies Luncheon
With Comedy Sportz



Friday, October 16th, 2020

Delta Hotel by Marriott

7111 Washington Avenue, Racine, WI

11:00 Social ~ 11:30 Lunch ~ 12:00 to 1:00 Program

Please Consider These Opportunities to Support Health Care Network

SPONSORSHIP:

_____ Platinum \$2500+ (10 Tickets)

_____ Gold \$1000+ (6 Tickets)

_____ Silver \$500+ (4 Tickets)

_____ Bronze \$250+ (2 Tickets)

EVENT TICKETS:

Table of 10 @ \$500..... \$ _____

Individual tickets @ \$50 per ticket..... \$ _____

DONATION: Please accept my cash donation of..... \$ _____

RAFFLE ITEM: Please contact us to make arrangements..... \$ _____

TOTAL: \$ _____

Yes, I want to support the efforts of the volunteers of Health Care Network!

Please accept my contribution to this event.

Form of payment: _____ Check enclosed - or - _____ Credit Card (Visa, Mastercard, American Express or Discover)

Credit Card Number / Exp. Date CVV _____
Signature

Name/Company to be listed in all publicity: _____

Contact Person: _____ Phone Number: _____

Address: _____

Email: _____

Proceeds benefit the work of Health Care Network, Inc.

500 Wisconsin Ave. Racine, WI 53403

(262) 632-2400 / specialevents@healthcarenetwork.org

Thank you for your support!