



Living Hope Banquet  
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SPONSORSHIP  
FORM  
NOVEMBER 2 • 6:30PM

Sponsorship Opportunities	Gold \$2,000	Silver \$1,000	Bronze \$500	Table \$375
Recognition Prior To Event				
Recognition in event invitation *	Logo	Name	-	-
Recognition on event website *	Logo	Logo	Name	-
Inclusion in the event press release *	Logo	-	-	-
Social media shout out	2	1	-	-
Day of Event				
Recognition in the event program *	Logo	Name	-	-
Recognition on slideshow *	Logo	Logo	Name	-
Sponsorship Announcement thanked during presentation	Yes	-	-	-
Dinner & Banquet seating	8 people	8 people	6 people	8 people
Sponsorship Gift Bags	8	8	6	8
After Event				
Recognition on the donor wall *	Logo	Name	Name	-
Recognition in the annual report *	Logo	Name	Name	-

**SPONSORSHIP DEADLINE: October 20th**

**\*PRINT DEADLINES: October 25h** - Email logos to [rena.cordell@riseuprecoverymn.com](mailto:rena.cordell@riseuprecoverymn.com)

**CONTACT INFO**

Rena Cordell  
Phone: 651-319-0122  
[rena.cordell@riseuprecoverymn.com](mailto:rena.cordell@riseuprecoverymn.com)

**ORGANIZATION INFORMATION**

CONTACT NAME \_\_\_\_\_ ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

**CHECKS PAYABLE TO**

RiseUp Recovery  
Tax ID# 86-3669082

**PAYMENT INFORMATION**

**Sponsorship Level:**  Gold  Silver  Bronze  Table  
**Payment Method:**  Online at <https://donorbox.org/2023-annual-banquet>  
 Check enclosed  Visa  Mastercard

**RETURN FORM TO**

RiseUp Recovery  
507 Vermillion St  
Hastings, MN 55033

CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**GUEST NAMES**

Guest 1 \_\_\_\_\_ Guest 2 \_\_\_\_\_

Guest 3 \_\_\_\_\_ Guest 4 \_\_\_\_\_

Guest 5 \_\_\_\_\_ Guest 6 \_\_\_\_\_

Guest 7 \_\_\_\_\_ Guest 8 \_\_\_\_\_

[www.riseuprecoverymn.com/annualbanquet](http://www.riseuprecoverymn.com/annualbanquet)

