



## 2024 Sponsorship Benefits

Saturday, October 26, 2024  
Scarborough, ME

[www.hikeforhospice.org](http://www.hikeforhospice.org)



*Home Hospice & Gosnell Memorial Hospice House*

390 U.S. Route One, Scarborough, ME  
207-289-3640 • 207-883-1040 (fax)  
[www.hospiceofsouthernmaine.org](http://www.hospiceofsouthernmaine.org)

<b>Your Benefits</b>	<b>\$10,000 Presenting</b>	<b>\$5,000 Compassion</b>	<b>\$2,500 Care</b>	<b>\$1,000 Comfort</b>	<b>\$500 Support</b>	<b>\$250 Friend</b>
your name/company name listed as "presented by" on all communications and event marketing	limited to 3 max					
invitation to speak at in-person event	X					
logo on community invitation to 12,000+ recipients *please submit logo by 8/9/24.	X	X				
complimentary registration	10	6	4			
verbal recognition at the event	X	X	X			
dedicated hsm social media post	logo	logo	logo			
participant shirt	logo	logo	name	name		
recognition on event banner and signage	logo	logo	name	name	name	
recognition on website (hyperlinked)	logo	logo	logo	name	name	name

**Questions? Please contact Jillian Tolman at [jtolman@hospiceofsouthernmaine.org](mailto:jtolman@hospiceofsouthernmaine.org) or (207) 615-9368.**

**Thank you for supporting Hospice of Southern Maine**

**Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Sponsors Level:**

\$10,000 Presenting  \$5,000 Compassion  \$2,500 Care  \$1,000 Comfort  \$500 Support  \$250 Friend

**Payment:**  Check made payable to Hospice of Southern Maine  Credit Card (or online at [hikeforhospice.org](http://hikeforhospice.org))

**Card Type:**  Visa  MC  Discover  AMEX

**Name as it appears on card:** \_\_\_\_\_

**CC#** \_\_\_\_\_ **Security Code:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **HFH24**