



**Saginaw County Community
Mental Health Authority
Everyday Heroes Banquet
Thursday, May 24, 2018 at 6:00 pm
Horizons Conference Center**



YES! I want to be a sponsor of this event:

☐ **GOLD** (\$700):

- Full-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program
- Tickets for up to 8 guests (table)
- Or designate all or a portion of tickets for award winners / consumers

☐ **SILVER** (\$600):

- Half-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program
- Tickets for up to 8 guests (table)
- Or designate all or a portion of tickets for award winners / consumers

☐ **BRONZE** (\$500):

- Quarter-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program
- Tickets for up to 8 guests (table)
- Or designate all or a portion of tickets for award winners / consumers

☐ **FREEDOM** (\$550):

- Full-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program

☐ **ACHIEVEMENT** (\$450):

- Half-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program

☐ **EMPOWERMENT** (\$350):

- Quarter-page ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program

☐ **HOPE** (\$300):

- Business card ad in event program
- Ad on 2018 Everyday Heroes webpage
- Recognition at event and in program

☐ **SPONSOR AN EVERYDAY HERO** (\$27.50):

- Designate a ticket for an award winner or consumer
- Recognition at event and in program

Please return this form to: SCCMHA, Attn: Accounts Receivable, 500 Hancock St, Saginaw, MI 48602.
Email to Advertisements to rmulder@sccmha.org. Advertisements MUST BE RECEIVED NO LATER THAN 4/09/18.

Name of Company _____

Contact Name _____

Company Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

CHECK ONE: ☐ Check enclosed (payable to SCCMHA) ☐ Charge to: ☐ VISA ☐ MasterCard

Card # _____ Exp. Date _____

Signature _____ Total Amount _____

**For more information, call Ryan Mulder at (989) 797-3501
Forms can be mailed to SCCMHA, 500 Hancock St, Saginaw, MI 48602
emailed to rmulder@sccmha.org or faxed to (989) 799-0206**

