

November 27, 2019

Dear Friend,

The Cape Fear Valley Health Foundation Gala has raised almost \$2,200,000 to support the needs of Cape Fear Valley Health since its inception in 2007. This event is known throughout the community as an elegant, beautiful affair that sells out every year, while raising much needed funds to enhance the health and wellness of our community. We are thankful to our dedicated community of supporters, like you, who make this possible year after year.

Proceeds from the 2019 Gala were designated to the Medical Residency Program at Cape Fear Valley Health, which launched in the summer of 2017. These funds were used to assist in providing state of the art medical training equipment, an essential element to equipping these new physicians with the skills needed to provide healthcare to our region. Past Galas have supported a variety of projects which have an ongoing impact in the patient programs and services provided to our community by Cape Fear Valley Health.

We hope we can count on your support of the 2020 Cape Fear Valley Health Foundation Gala, presented by Campbell University, Olde Fayetteville Insurance and Financial Services and Mercedes Benz of Fayetteville. Proceeds from this event will continue to support the Cape Fear Valley Health Residency Program, particularly the campaign for the Academic Center for Medical Education and Research. This facility will house the training space necessary to continue to train the next generation of physicians to this region of North Carolina. Through your support, you will be making a difference to so many in our community, for which we are grateful.

New this year, we have added #latenightattheGala, an additional way for our community to support the Gala by attending the second half of the evening. Sponsors at the Dogwood Level and above will receive additional passes as part of their sponsorship.

Please join us for the **14**th **Annual Cape Fear Valley Health Foundation Gala** on Saturday, January 25, 2020 at Highland Country Club. With your support, we can improve the future of healthcare in our region for generations to come.

Sincerely,

Paige Ross

Gala 2020 Co-Chair

Kensley Edge Gala 2020 Co-Chair

Kendey I. Edge









Premium Sponsorships

Saturday, January 25, 2020 - 6:30pm Highland Country Club

Cardinal	Presenting	Sponsor
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\$12,000

- o Two tables of 8 (16 tickets) Guaranteed in the Ballroom
- Logo/Name on all printed materials, to include invitations, tickets, sponsor board, social media, publications and advertising materials
- VIP social for you and your guests held at 5:30pm on the night of the gala
- Formal photo of your team and Mr. Nagowski during VIP Reception
- o Reserved VIP prominent ballroom seating and recognition throughout the event
- Premiere recognition in all printed marketing materials
- Six additional #latenightattheGala Passes

Carolina Sponsor

\$7,500

- o One table of 12 (12 tickets) *Guaranteed in the Ballroom*
- Logo/Name on invitations, tickets, sponsor board, Facebook page
- VIP social for you and your guests held at 5:30pm on the night of the gala
- o Formal photo of your team and Mr. Nagowski during VIP Reception
- o Reserved prominent ballroom seating and recognition during the event
- o Recognized in the printed marketing materials
- o Four additional #latenightattheGala Passes

Dogwood Sponsor

\$5,500

One table of 10 (10 tickets) Guaranteed in the Ballroom

- o Logo/Name on invitations, tickets, sponsor board, Facebook page
- o Reserved seating, preferred ballroom and recognition during the event
- Recognized in all printed marketing materials
- Check presentation photo opportunity
- O Two additional #latenightattheGala Passes

□ Azalea Sponsor

\$4,000

- o One table of 8 (8 tickets) Ballroom Seating until Capacity or Magnolia Bar & Grill
- o Name on the invitations, tickets, sponsor board, Facebook page
- Reserved seating and recognition during the event

Sponsorships are filled according to the return of your pledge to the Foundation office.

Final deadline for sponsorship commitments is December 6, 2020.

PO Box 87526 Fayetteville, NC 28304-7526 Medical Arts Center 101 Robeson Street, Suite 106, Fayetteville, NC 28301-5220 Telephone (910) 615-1285 Fax (910) 615-9920



Premium Sponsorship Pledge

Yes, I commit to being a sponsor of the Cape Fear Valley Gala on January 25, 2020 at the following level:

	2020 at the following level:								
Plea	se check one								
	\$12,000 – Cardinal Presenting Sponsor		\$7,500 – Carolina Sponsor						
	\$5,500 – Dogwood Sponsor		\$4,000 – Azalea Sponsor						
Each level of sponsorship comes with event tickets, recognition during the program and on the Foundation website. See sponsorship levels form for details and associated benefits.									
Com	pany or individual name:(As you would l	like it to	appear in printed materials)						
Con	act name (please print):								
Add	ress:								
City		Stat	ze: Zip:						
Pho	ne:Fax:		Email:						
Seating Preference : Please refer to the sponsorship levels benefits form for seating information. We will try our very best to accommodate your preference as much as possible, as space is limited in each room.									
	☐ Ballroom - Guaranteed for Dogwood Sponsor and above. Azalea Sponsor until capacity is reached.								
☐ Magnolia Bar & Grill									
To request a vegetarian, gluten free or any special meal needs, please fill out the RSVP form for your guests that you will receive in the mail to be returned to the Foundation office by January 6, 2020. Special request will not be available the day of the event.									
	☐ Please send an invoice. Payments fo	or spor	nsorships may be made in multiple installments.						
Send to: Cape Fear Valley Health Foundation, Attn: Gala PO Box 87526, Fayetteville, NC 28304 You may also fax this form to (910) 615-9920 or email Foundation@capefearvalley.com.									

Because of the value of the goods and services you are receiving in consideration in whole or in part for your contribution are \$70 per ticket; a portion of the ticket price is eligible for tax deductibility. Cape Fear Valley Health Foundation is a 501 (c) (3) charitable organization whose tax identification number is 56-1947017.



Exclusive Cliff's Bar Seating

Saturday, January 25, 2020 - 6:30pm Highland Country Club- Attire: Formal

Yes, I commit to be a Cliff's Bar Sponsor of the Cape Fear Valley Gala on January 25, 2020. Exclusive seating in Cliff's Bar and Grill at a table of 6. All seating and sponsorships are determined on a first come first serve basis.								
\$3,000 – Guaranteed Table of 6 in Cliff's Bar and Grill. Table can be split per couple or sponsored as a group. All will receive recognition in event slideshow and Cliff's Bar Lobby Signage.								
Company	or individual name:							
	or individual name:(As you would like it to appear in printed materials)							
Signature	gnature: Date:							
	ame (please print):							
City:	State: Zip:							
Phone: _	Fax:Email:							
To request a vegetarian, gluten free or any special meal needs, please fill out the RSVP form for your guests that you will receive in the mail to be returned to the Foundation office by January 6, 2020. Special request will not be available the day of the event.								
	Please send an invoice. Payments for sponsorships may be made in multiple installments.							
	Final deadline for sponsorship commitments is December 6, 2020.							
Send to : Cape Fear Valley Health Foundation, Attn: Gala PO Box 87526, Fayetteville, NC 28304 You may also fax this form to (910) 615-9920 or email Foundation@capefearvalley.com.								

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Honorable Sponsorships

Saturday, January 25, 2020 • 6:30 PM Highland Country Club - Attire: Formal

☐ Yes, I (we) would like to be an Honorable Sponsor of Cape Fear Valley Health Foundation Gala and receive 2 event tickets for <i>exclusive Ballroom Seating</i> . Enclosed is a check for \$1,000 or credit card information. (10 Available)									
Yes, I (we) would like to be an Honorable Sponsor of Cape Fear Valley Health Foundation Gala and receive 2 event tickets. Enclosed is a check for \$550 or credit card information. (Seating in Magnolia Grill)									
Company or Individual Name:									
(As you would like for it to appear on printed materials)									
Signature:	ignature: Date:								
Contact name (Please Print):Address:									
Addi ess.									
City:		State:		Zip:					
Phone:		Email:							
To request a vegetarian, gluten from for your guests that you will receive January 6, 2020. Special	ive i	in the mail to b	e retur	ned to the Foundation office by					
☐ Personal Check		Cash		Credit Card Type					
Card Number	41.								
Exp. Date									

Send to: Cape Fear Valley Health Foundation, Attn: Gala PO Box 87526, Fayetteville, NC 28304 You may also fax this form to (910) 615-9920 or email Foundation@capefearvalley.com.

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