



28th Annual Gala Dinner Dance

Friday, May 31, 2019
OnCenter, Syracuse, NY

Gala Sponsorship Amount: \$ _____

Presenting Sponsor: CNY Infusion Services, LLC



27th Annual Golf Classic

Thursday, September 5, 2019
One day, three courses! Turning Stone Resort

Golf Sponsorship Amount: \$ _____

Course preference: Shenendoah _____ Kaluhyat _____

Atunyote (additional \$125 per golfer, limited space available) _____

Total Contribution: \$ _____

Proceeds from the 2019 Gala and Golf Classic will benefit
St. Joseph's Health Neonatal Intensive Care Unit

THANK YOU FOR YOUR GENEROUS SUPPORT!

SPONSORSHIP CONTACT INFORMATION

Organization: _____

(Exactly as you wish to be acknowledged)

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Authorized Signature: _____ Date: _____

(*REQUIRED* Signature indicated authorization to make this commitment on behalf of the above organization)

SPONSORSHIP PAYMENT INFORMATION

_____ Please invoice our contribution to the contact information about (payment due prior to each event)

- St. Joseph's Health Foundation Tax ID #: 22-2149775
- Please make checks payable to: **St. Joseph's Health Foundation**
- Pay by Visa, Mastercard, AmericanExpress or Discover

Name on card: _____

Card Number: _____ Exp. Date: _____ CVC: _____

Signature: _____