

TOMAGWA Healthcare Spring Formal Partner's Dinner Sponsorship Opportunities

Make it a Night to Remember

Food Sponsor

\$15,000

6 dinner tickets
Verbal recognition at
Event welcome
Social media spotlight
Full page ad in
program

Décor Sponsor

\$2,500

3 dinner tickets Company
recognition on social media
Logo on table signs
¼-page ad in program

Invitation Sponsor

\$1,500

2 dinner tickets
Company recognition
on social media
Logo on back of
invitation Logo in
program

Awards Sponsor

\$5,000

6 dinner tickets
Verbal recognition at
Event welcome
Company recognition on
social media
Half page ad in program

Special Honorees

Northwest EMS
Houston Methodist Hospital
Tomball Regional Health Foundation
Magnolia Pharmacy
American Heart Association
Gary Greene Realty
Magnolia Funeral Home
The Rose Mammography
The Helm Foundation
Baylor College of Medicine
B-Geo Berger Geosciences
AmRisc
Texas A&M School of Nursing
ReSale with A Purpose
AmCap Mortgage
The Ryan Paul Whitaker Foundation
Tomball Chamber of Commerce
Commissioner Charlie Riley
TX State Representative Cecil Bell
TX State Representative Tom Oliverson
State Senator Lois Kolkhorst
U.S. Representative Kevin Brady

Presentation Sponsor

\$1,500

2 dinner tickets
Company recognition
on social media
Logo placement
on presentation
slides Logo in
program

Valet Sponsor

\$2,500

3 dinner tickets,
company recognition
on social media
Logo placement at valet
entrance & on valet bags
¼-page ad in program

Photobooth Sponsor

\$1,000

2 dinner tickets
Logo placement at
photobooth entrance
Logo placement on
photo strips Logo in
program



Annual Spring Formal Partner's Dinner May 5th @6:00pm

Registration and Sponsor Information

- Yes. I would like to sponsor the TOMAGWA Annual Spring Formal Partner's Dinner May 5th @6:00pm
Sponsorship Selection _____ Total Amount \$ _____
- I am unable to attend but would like to make a donation to TOMAGWA in the amount of \$ _____
- I want to purchase a table at the event for \$1,000

Payment Method Check (Payable to TOMAGWA HealthCare Ministries) Credit Card

Sponsor Name _____ Name on Card _____
 Contact Name _____ Card # _____
 Street Address _____ Expires _____ CVV _____
 City, State & Zip _____ Signature _____
 Phone _____ Date _____
 Email _____

Tickets, tables, and sponsorships can also be secured online at tomagwa.org

Forms may be emailed to kristys@tomagwa.org or mail completed forms/checks to: TOMAGWA HealthCare Ministries at 455 School St., Suite 30, Tomball, TX 77375.

DEADLINE: Sponsor form, payment, and logo must be received no later than April 25, 2022