

# 2017 Donate2Date Charity Date Auction

## Donate2Date

Friday, August 18th, 2017

SPONSOR AND PURCHASE TICKETS AT [CHILDRENSCOLORADOFUNDATION.ORG/DONATE2DATE](http://CHILDRENSCOLORADOFUNDATION.ORG/DONATE2DATE)

*Join us* for the 2017 Donate2Date auction on August 18th at

Edge at the Four Seasons! Pre- selected bachelors and bachelorettes will be auctioned to a bidding audience for future dates. We anticipate our bachelor and bachelorettes will include, but will not be limited to: local TV and radio personalities, doctors, nurses, and area safety personnel.

The purpose of the Young Professionals Chapter (YPC) is to assist Children's Colorado in its mission by providing volunteers and resources to support patients, families and staff. All proceeds generated from the date auction will be used to meet unmet non-medical needs of patients and their families, and by doing so, to brighten the hospital experience for our special customers. To bring the date auction to fruition we are asking for your help in a sponsorship or donation of a date package.

### Sponsor Levels, Benefits and Tickets

#### **Premier Sponsor: \$ 5,000**

- Exclusive sponsor on auction paddles
- Vote in selection process
- Group picture with bachelors and bachelorettes
- \$100 drink tab
- All of Red Sponsor inclusions

#### **Red Sponsor: \$ 2,000**

- Company name recognized as top sponsor on printed Date Auction marketing materials
- Name recognition at the Date Auction by the event MC
- Company name recognized as a sponsor in Date Auction Program
- 6 tickets to the event with table near stage
- Recognition on Donate2Date's website with Company logo and link to website

#### **Yellow Sponsor: \$ 1,000**

- Company name recognized as a sponsor in Date Auction Program
- Four tickets to the event
- Recognition on Donate2Date's website with Company logo and link to website

#### **Blue Sponsor: \$500**

- Company name recognized as a sponsor in Date Auction Program
- 2 tickets to the event

#### **Admission Ticket: \$ 40 online or \$50 day of / at the door**

- Admission for 1 and 1 drink ticket



# Donate<sup>2</sup>Date

## Commitment Form

1. Sponsorship Level: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  Donation in lieu of attendance

### 2. Sponsor/Donor Information

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

Company name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Business phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Business fax: \_\_\_\_\_

Email: \_\_\_\_\_

Alt. contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Alt. contact email: \_\_\_\_\_

### 3. Sponsorship Name: \_\_\_\_\_

Please indicate how you would like to be listed in recognition. (Does not apply to ticket purchasers.)

### 4. Payment Method:

Purchase online: [www.childrenscoloradofoundation.org/donate2date](http://www.childrenscoloradofoundation.org/donate2date)

Check Enclosed (Please make checks payable to: Children's Hospital Colorado)

Credit Card Circle one: Visa/MasterCard/ AMEX

Name on card: \_\_\_\_\_ Company Credit Card? (Y/N)

Billing Address from Statement: \_\_\_\_\_

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

Credit Card No.: \_\_\_\_\_ Expiration Date: \_\_\_\_ / \_\_\_\_

Signature: \_\_\_\_\_

PLEASE RETURN FORM TO :

FAX: 720.777.7120 EMAIL: [info@ypcchildrenscolorado.com](mailto:info@ypcchildrenscolorado.com)

MAIL: 13123 East 16th Ave, Box 465, Aurora CO 80045

To make a credit card donation by phone, please contact Jeffri at 720.777.1725

Visit [www.donate2date.com](http://www.donate2date.com) for more information, or call Beth Muir at 720.971.5762



*Donate2Date is an event of The Young Professionals Chapter of Children's Hospital Colorado, which is a 501(c) (3) tax-exempt organization. Our tax identification numbers are 84-0166760 (federal) and 98-01208 (state). Federal income tax laws limit the charitable deduction of this contribution to the amount by which the contribution exceeds the fair market value of the items provided.*

# Donate2Date

## Date Package or Silent Auction Donation Form

1. Item donating: \_\_\_\_\_ Value: \$ \_\_\_\_\_

### 2. Sponsor/Donor Information

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

Company name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Business phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Business fax: \_\_\_\_\_

Email: \_\_\_\_\_

Alt. contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Alt. contact email: \_\_\_\_\_

3. Sponsorship Name: \_\_\_\_\_

Please indicate how you would like to be listed in recognition.

### 4. Donation Description:

Please include a description of the item(s) donated.

This will be included in the auction catalog. Include any restrictions.

Please check appropriate items:

- Item or gift certificate accompanies this form.
- Please arrange pick-up of item/gift certificate.
- Donor will arrange delivery of item/gift certificate.
- The Donate2Date committee is to create a gift certificate with information provided above.

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