



CANCER SUPPORT  
**COMMUNITY**  
GREATER PHILADELPHIA



**GILDA'S  
CLUB**

## **Designer Handbag & Gift Card Bingo**

Sunday, December 3, 2023  
(Doors Open 1:30)

Ben Wilson Senior Center

### **SPONSORSHIP OPPORTUNITIES**

#### **Presenting Sponsor: \$1000**

Includes prominent listing in the program, 6 tickets to the event (reserved table up front), and exhibitor table at event for information and giveaways.

#### **Special Games Sponsor: \$500 (Two Available)**

Signage at special games purchase area, prominent listing in program and name/company support announced before each special game. Can be sponsored in honor or in memory of a loved one.

#### **Raffle Sponsor: \$250**

Signage in front of raffles, prominently listed in the program and name/company support announced during the event.

#### **Candy or Water Sponsor: \$150**

Signage prominently listed in the program and name/company support announced during the event.

#### **Game Sponsor: \$100 (10 Available)**

Bingo game dedicated in honor or memory of a loved one. Listed in the program book and announced during the event.

#### **Donation: Any donation amount for this event is appreciated!**

Email completed form to [Kathy@cancersupportphiladelphia.org](mailto:Kathy@cancersupportphiladelphia.org) or mail to:

Cancer Support Community Greater Philadelphia  
200 Kirk Road  
Warminster, PA 18974

Your donation will help support those living with cancer and their families.

All sponsor commitments must be received by November 20, 2023.

Thank You!

Fax: 215-441-3295 | Phone: 215-441-3290 | Tax ID 23-2657403  
[www.cancersupportphiladelphia.org](http://www.cancersupportphiladelphia.org)



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## Designer Handbag & Gift Card Bingo

### SPONSORSHIP REPLY FORM

Contact Name:	
Company Name:	
Address:	
Phone (Work):	Cell:
E-mail Address:	
Please Check the Appropriate Level of Sponsorship:	
<input type="checkbox"/> Presenting Sponsor \$1000	
<input type="checkbox"/> Special Game Sponsor \$500	
<input type="checkbox"/> Raffle Sponsor \$250	
<input type="checkbox"/> Water or Candy Sponsor \$150	
<input type="checkbox"/> Game Sponsor \$100	
<input type="checkbox"/> Donation \$_____	

#### METHOD OF PAYMENT

Check: My check in the amount of \$_____ accompanies this form	
Credit Card: (Please check one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express	
Card Number:	Expiration Date:
Name as it appears on card:	
Signature:	
If sponsoring a game or games, please indicate whether the game(s) are in honor or memory of a loved one, and please give the loved one's name on the following below:	

***Email completed form to [Kathy@cancersupportphiladelphia.org](mailto:Kathy@cancersupportphiladelphia.org) or mail to:***  
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