

8th Annual

RAISE YOUR GLASS

Wine Tasting Fundraiser

Tuesday, May 24, 2022 | 6:00 pm - 8:00 pm Windridge Vineyards, 15700 Darnestown Rd., Darnestown, MD

Sponsorship Opportunities

\$6,000 Premier Sponsor

Ten tickets to the event Listing in event program Logo and link to company website on event page of our website Link to company website in our e-newsletter Feature article about donor/company in our e-newsletter Opportunity to speak publicly at the event

\$3,000 Reserve Sponsor

Eight tickets to the event Listing in event program Logo and link to company website on event page of our website Listing in our e-newsletter

\$1,500 *Refined* Sponsor

Six tickets to the event Listing in event program Listing and link to company website on event page of our website Listing in our e-newsletter

\$750 Select Sponsor

Four tickets to the event Listing on event page of our website Listing in event program

*Individual tickets: \$85 per person until May 3rd *\$95 After May 3rd. Each attendee will receive two raffle tickets

Floral decorations provided by EDGE Floral Event Designers

CaringMatters | 518 South Frederick Ave., Gaithersburg, MD 20877 301-869-HOPE (4673) | Fax: 301-990-4909 | CaringMatters.org

We are a 501(c)(3) non-profit organization registered with the State of Maryland, and our EIN is 52-1591455. A copy of our current financial statement is available by contacting CaringMatters at 518 South Frederick Avenue, Gaithersburg, MD 20877 or at 301-869-4673. Documents and information submitted to the State of Maryland Charitable Solicitations Act are available from the Office of the Secretary.

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Allison Stearns, MS, MPH, LCPC



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PERSONAL CONTACT INFORMATION

Please note: CaringMatters does not share your contact information.

Sponsorship Pledge Form

Name		-		
Street Address		City/State/Zip		
Email	Phone		Fax	
BUSINESS CONTACT INFOR	MATION (if applicable)			
Company Name				
Contact Name				
Street Address	City/State/Zip			
Email	Phone		Fax	
SPONSORSHIP INFORMATI	ON (please see details on reve	erse side)		
Sponsorship Level (check one): [□ Premier \$6,000 □ Reserve	\$3,000	<i>Refined</i> \$1,500	☐ <i>Select</i> \$750
ist Sponsor As:		Company Website:		
PAYMENT INFORMATION (check one)			
Check – Please make check p	ayable to CaringMatters			
☐ Credit Card Number		_ Exp. Date _	CVC C	ode
Amount Authorized \$	Name on Card			

Please complete this form and email to leighb@caringmatters.org, fax to 301-990-4909, or mail to:

CaringMatters, 518 S. Frederick Ave., Gaithersburg, MD 20877