

Sponsorship Opportunities

Annual Benefit	Platinum \$5,000	Gold \$2,500	Silver \$1,000	Bronze \$500	Star \$250
Corporate logo (\$1,000 or above) or name featured on event webpage, social media and additional pre-event marketing.*	✓	√	✓	✓	✓
Corporate name featured in post-season thank you ads	✓	√	✓	✓	✓
Recognition on event day signage	✓	✓	√	✓	✓
Corporate name/logo featured at guest check-in area and walkways between cocktail reception and dinner	✓	√	✓		
Corporate name verbally recognized during event	✓	✓			
Featured sponsor listing on social media	✓	\checkmark			
Featured sponsor listing in one NLH art exhibit hallway	✓				
Table for 10 guests	✓				
Table for 8 guests		✓			
Tickets for 4 guests			✓		
Tickets for 2 guests				√	

 $^{^{}st}$ Inclusion in pre-event promotion and event day signage is dependent on commitment date



New London Hospital

- 2022 EVENT -

SPONSORSHIP FORM

Contact Information

Company								
Contact Name		Conta	ct Title					
Address								
City/State/Zip								
Phone		Email						
			• • • • • • • • • •	• • • • • • • •				
Partnership Option								
Golf Invitational:	\$2,500	\$1,000	\$500	\$250	Raffle Item			
			Golf Raffle Item(s)					
Hospital Days/Triathlon:	\$2,500	\$1,000	\$500	\$250				
Annual Benefit:	\$5,000	\$2,500	\$1,000	\$500	\$250			
I/we do not require sponsorship recognition; however I/we do wish to support New London Hospital. Please accept my/our contribution in the amount of: \$								
	• • • • • • • • • •			• • • • • • • • • •				
Method of Payment								
Check Made payable to Ne	ew London Hospital							
Credit Card via Website www.newlondonhospital.org/events-classes								

Please submit completed form and/or check to: community.relations@newlondonhospital.org or Mail to: New London Hospital, Attn: Community Relations, 273 Country Road, New London, NH 03257

Thank you for your support!

For more information about our events visit our website: www.newlondonhospital.org or call (603) 526-5427

