



2018 Commitment Form

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| <input type="checkbox"/> Festival Sponsor \$5,000 | <input type="checkbox"/> Gingerbread Sponsor \$500 |
| <input type="checkbox"/> Sugar & Spice Sponsor \$2,500 | <input type="checkbox"/> Crab Pot Tree Sponsor \$100 |
| <input type="checkbox"/> Gum Drop Sponsor \$1,000 | <input type="checkbox"/> In-kind Sponsor: Value \$ _____ |

Crab Pot Tree Decorating Options

- | | |
|---|---|
| <input type="checkbox"/> Sponsor to decorate Tree | <input type="checkbox"/> Festival team to decorate Tree |
| <input type="checkbox"/> I would like to purchase my decorated tree for an additional \$100 | |
| <input type="checkbox"/> I would like my decorated tree to be placed in the Gingerbread Tree lot for sale | |
| <input type="checkbox"/> I would like to donate my decorated tree to a business or family in need* | |

*to be chosen and delivered by sponsor

PRINT DEADLINE FOR SIGNAGE & FESTIVAL T-SHIRT IS NOVEMBER 9

— Payment Information —

Business/Individuals: _____
 (as you would like it to appear on promotional materials)

Contact Person: _____ Title: _____

Daytime Phone: _____ Cell: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

PLEASE MAKE CHECK PAYABLE TO CRYSTAL COAST HOSPICE HOUSE (CCHH)

- Check is attached in the amount of \$ _____ Check # _____
- Please Invoice
- Payment by Credit Card *For Credit Card Payment: Contact Kay Coole, Office Coordinator, 252-808-2244*

All proceeds benefit SECU Crystal Coast Hospice House