Share A Night

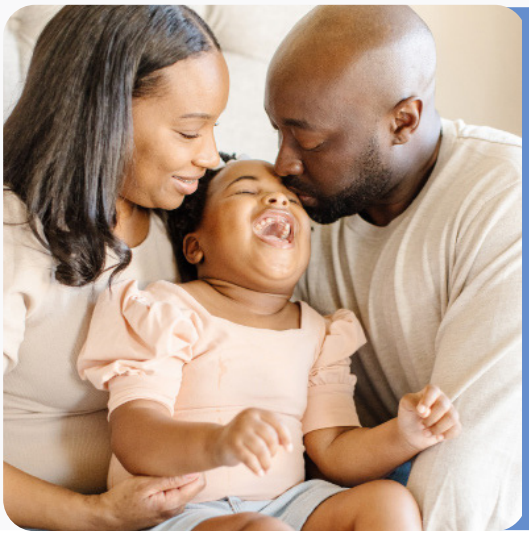
about the event

Share a Night

Thursday, December 15

House Lighting Ceremony

For each $15 donation made during our Share A Night Campaign, one holiday light will be added to the outdoor decorations.



Your Share A Night sponsorship will help make sure that families with ill or injured children in local hospitals have access to a warm bed and a hot meal during the holidays and all year long.

For more information, contact

Dawn Brooks
d.brooks@rmhde.org
office: (302) 428-5315
cell: (302) 547-3624

Or visit our website at **www.rmhde.org.**

Share A Night

sponsorship opportunities

Share A Night	Level Amount	Featured on event signage	Featured in 2023 Newsletter	Featured in Event Program	Outside recognition display during Share A Night	1 Acknowledgement via Social Media	Logo in Delaware State News full page ad	Logo on RMHDE website	Speaking opportunity at event
Gift of Peace	$10,000	X	Logo	X	X	X	X	X	X
Gift of Love	$5,000	X	Logo	X	X	X	X	X	
Gift of Devotion	$2,500	X	Logo	X	X	X	X	X	
Gift of Kindness	$1,000	X	Name	X	X	X	X		
Gift of Friendship	$250-$999		Name	X					

Families are asked to contribute $15 per night, but many families cannot afford that amount. Our average room donation is $3.84 while it costs $72 per night to operate each guest room.

For more information, contact

Dawn Brooks
d.brooks@rmhde.org
office: (302) 428-5315
cell: (302) 547-3624

Or visit our website at **www.rmhde.org.**

Share A Night

sponsorship agreement

Please complete this form and return to:
Dawn Brooks
Ronald McDonald House of Delaware
1901 Rockland Road, Wilmington, DE 19803

SPONSORSHIP LEVEL SELECTION

We would like to be an Event Sponsor at the following level (see prior page for details):

_____ Gift of Peace $10,000
_____ Gift of Love $5,000
_____ Gift of Devotion $2,500
_____ Gift of Kindness $1,000
_____ Gift of Friendship $250-$999

Sponsor name as you would like it to appear in promotion. Please print.

We are unable to sponsor this event this year, but would like to make a contribution:

_____ $105 covers the cost of a family's stay for one week
_____ $450 covers the cost of a family's stay for one month
_____ Other Amount: $_____

PAYMENT (OR PAY ONLINE with a Credit Card at **give.rmhde.org/sponsor**)

_____ Check enclosed payable to **Ronald McDonald House of Delaware.**
_____ Please send an invoice to the address information below.

SPONSOR CONTACT INFORMATION

Contact Name	
Email	
Phone	
Address	

SOCIAL MEDIA HANDLES

Please provide your company's social media handles where applicable to receive sponsor aknowledgements.

Facebook: _____ Linkedin: _____

Instagram: _____