



Friends of Sinai's Fantastic Voyage

"Navigating towards Healthier Kids"

Kanan Cruises
Navy Pier
October 3, 2009
7:30-10:30 pm

COMMITMENT FORM

A Benefit For
Sinai Children's Hospital
Where Every Child Counts

CONTACT INFO

Name _____ Title _____

Company _____

Address _____

City _____ State _____ Zip _____ Phone _____

Email _____

(e-mail will be used only to confirm registration and to send any pertinent information regarding event)

Sponsorship Levels:

- Admiral Sponsor \$ 15,000
- Captain Sponsor \$ 5,000
- Commodore Sponsor \$ 10,000
- Lieutenant Sponsor \$ 1,500

Tribute Book

****Ad Deadline is September 11, 2009****

- Full Page Ad \$500 (size: 4.5"w x 7.5"h)
- Half Page Ad \$300 (size: 4.5"w x 7.5"h)
- Quarter Page Ad \$150 (size: 2.25"w x 3.5"h)

**For additional questions on ad specs, please contact Steve Juhasz at Fullline Printing 312-642-8080*

Purchase Tickets

- Individual ticket \$100 No. of tickets: _____

Form of Payment:

- Personal/Company check - made payable to **Friends of Sinai Children**.

- Credit Card – Discover MasterCard Visa

Name on Card _____

Card # _____

Exp. Date _____ Sec. Code _____ Amount \$ _____

Signature _____ Date _____

Sinai Children's Hospital not-for-profit Tax I.D. # is: 36-1509000.

For further questions about Friends of Sinai's Fantastic Voyage, please contact Marilyn Tamayo. Please return this form to:

Marilyn Tamayo | Office of Development | Sinai Health System
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