



Children's Dental Health Association's Glenn Thacher Memorial 36th Annual Day at the Races
Wednesday, August 26th, 2009

Sponsor/Underwriter/Donor Form

Sponsor

_____ \$10,000 "CHAMPIONSHIP" _____ \$5,000 "WIN" _____ \$2,500 "PLACE" _____ \$1,000 "SHOW"

Underwriting

_____ Invitation (\$3,000) _____ Fruit and Cheese Service (\$2,000)
_____ Event Program (\$1,000) _____ Audio Presentation (\$500)
_____ Race Donor (\$500)

Contact Information (Company or persons to be acknowledged in print)

Name _____

Contact Person _____

Mailing Address _____

Telephone _____ Fax _____

Amount: \$ _____ _____ Check _____ Visa _____ MasterCard

Make checks payable to: **Children's Dental Health Association**

Credit Card # _____ Exp. Date _____

Authorized Signature _____ Print Name _____

I am unable to Sponsor Day at the Races. Please accept my tax deductible donation of \$ _____
I am unable to Sponsor, but I would like to reserve _____ Event tickets at \$60 each.

__ I/we would like to remain anonymous.

Sponsorships, reservations, underwriting and donations are tax deductible. **Tax ID #95-2545484**
In order to receive invitation recognition, your response is appreciated by **June 30, 2009**.
Program Artwork must be received by July 10, 2009 to meet Program print deadline.

Please complete form and retain a copy for your records.
Mail original to: CDHA 1270 24th Street, San Diego, CA 92102 or fax to (858) 571-8853.

If you need any additional information, please contact
Katie Judd Chairperson **858-571-1795**
Randie Sturtevant Dir. of Special Events & Outreach **858-775-1513**
www.childrensdentalhealth.org

Your formal invitation to the
36th Annual Day at the Races
will be sent in July 2009

Please accept our sincerest thanks for your generous support!

