



Saint Luke Institute Annual Benefit 2009 Sponsorship Form

Name _____
(as you would like it to appear in the Annual Benefit Program)

Address _____

City _____ State _____ Zip _____

Day Telephone _____ Evening Telephone _____

E-mail _____ Cell Telephone _____

- I/We are pleased to be a sponsor of the Saint Luke Institute Annual Benefit honoring Cardinal Theodore E. McCarrick**
Our sponsorship level is:

- | | | |
|--------------------------|-------------------|-----------|
| <input type="checkbox"/> | Leaders Circle | \$100,000 |
| <input type="checkbox"/> | Guarantor | \$50,000 |
| <input type="checkbox"/> | Underwriter | \$25,000 |
| <input type="checkbox"/> | Major Contributor | \$10,000 |
| <input type="checkbox"/> | Benefactor | \$5,000 |
| <input type="checkbox"/> | Sponsor | \$3,000 |
| <input type="checkbox"/> | Patron | \$1,500 |
| <input type="checkbox"/> | Friend | \$750 |
| <input type="checkbox"/> | Other | \$ _____ |

I/We have enclosed our gift of \$ _____ (please make checks payable to "Saint Luke Institute")

I/We are unable to be a sponsor of the Annual Benefit but would like to contribute \$ _____ to the healing ministry of Saint Luke Institute

Note: Individual tickets are available for \$250 each [non-tax-deductible portion is \$75].

Signature _____ Date _____

Thank you!

8901 New Hampshire Avenue ▪ Silver Spring, Maryland 20903
Main number: 301-445-7970 ▪ Fax number 301-422-5400 ▪ www.sli.org