Texas Pediatric Society Foundation
Sponsor Form

PLATINUM SPONSOR - $10,000
(The value of each benefit is listed)
- Exclusive full-page “Thank You” ad in Texas Medicine ($600)
  (Circulation 35,000)
- Company logo link on TPSF event website
- Table for 10 at the event ($1,000)
- Exclusive signage at the event
- Recognition from the podium during event
- Name engraved on Benefactor Board (large plate)
- Included in Promotion Emails to the TPS membership (over 4000 Texas Physicians, Residents/Fellows, and Medical Students)
- Recognition in TPS Annual Meeting final program (if received by 06/10) (Circulation 4000)

GOLD SPONSOR - $5,000
(The value of each benefit is listed)
- Exclusive 1/2-page “Thank You” ad in Texas Medicine ($300)
  (Circulation 35,000)
- Recognition in TPS Annual Meeting final program (if received by 06/10) (Circulation 4000)
- 4 Benefit Tickets ($380)
- Recognition on TPS Foundation website
- Name Engraved on Benefactor board (large plate)
- Event signage

SILVER SPONSOR – $2,500
(The value of each benefit is listed)
- Exclusive 1/6-page “Thank You” ad in Texas Medicine ($100)
  (Circulation 35,000)
- Recognition in TPS Annual Meeting final program (if received by 06/10) (Circulation 2800)
- 2 Benefit Tickets ($190)
- Recognition on TPS Foundation website
- Name Engraved on Benefactor Board
- Listing with all sponsors in Texas Medicine
- Event signage

BRONZE SPONSOR - $1,500
(The value of each benefit is listed)
- 2 Benefit Tickets ($190)
- Name engraved on Benefactor Board
- Recognition on TPS Foundation website
- Listing with all sponsors in Texas Medicine
- Event signage

FRIEND OF THE FOUNDATION - $250
- Recognition on TPS Foundation website
- Listing with all sponsors in Texas Medicine
- Event signage

Annual Benefit & Fundraiser
Renaissance Dallas at Plano Legacy West
Plano, TX
Saturday, September 21, 2019
6:30 – 10:00pm
* Silent Auction * Dinner * Entertainment

Contact Information
You can save a stamp by contributing online @ http://txpeds.org/annual-benefit

Name of company, foundation or individual
EXACTLY as it should appear in print

- □ If you wish to remain anonymous

Contact: ____________________________
Title: ______________________________
Address: ___________________________
City, State, Zip: _______________________
Phone: ( ) __________________ Fax: ( )
Email: ______________________________

Method of Payment
- □ Enclosed is my check for $____________
- □ Please charge my:
  □ VISA □ MasterCard □ Discover

Amount $____________________________

Card# ________________________________
CID # (3 digit code on back of card)__________
Expiration Month/Year: __________________
Name on Card: _________________________

Signature: ________________________________

The TPS Foundation is a 501(c)(3) charitable tax-exempt organization - IRS tax-exempt number 74-3023211. Please keep a copy of this form for your records.
http://www.txpeds.org/TPS_Foundation

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