COOKING FOR A CAUSE: VISIONS OF VALENCIA

Sonrisas Dental Health's 8th Annual Benefit Fundraiser

Sonrisas Dental Health



SPONSPORSHIP OPPORTUNITIES

SONRISASDENTAL.ORG

WELCOME!

On behalf of the Board of Directors and staff of Sonrisas Dental Health, I have some exciting news to share! Sonrisas Dental Health's (SDH) annual Cooking for a Cause is on Saturday, September 17th, 2022. Plan to enjoy a festive evening that celebrates your donor partnership with SDH including silentand live auctions, and a fund-a-need to support Sonrisas' mission. Guest chefs will cook exquisite, authentic paella on site while you enjoy a signature Spanish themed libation and curated wines amid twinkling lights and décor. The gala returns to the courtyard of the Half Moon Bay Public Library with all mandated Covid prevention measures in place as directed by San Mateo County.

We seek sponsors to make this event a powerful support for the families we serve and for our organization. We will share compelling stories about the important service SDH provides in our community as a non-profit dental center dedicated to providing access to quality dental care and oral health education with dignity, respect and compassion.

This year's event is going to be very special as we honor a community hero who has made dental care more accessible for under-resourced members of our community. We are elated and excited to bring our community together for this signature event. I have attached the sponsorship packet that outlines the benefits for your organization and the sponsorship commitment form for your review.

All sponsors will be listed on our website, highlighted on our social media channels, and will be included in the event materials. We are expecting 150 participants from households with spending power and decision-making capacity who are all potential clients of your organization or business. With your support, we hope to raise over \$100,000 to provide

In Partnership,

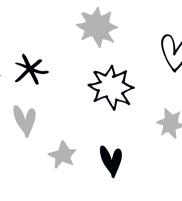
Schecher

Tracey Carrillo Fecher CEO

dental care to low-income patients.

SPONSORSHIP PACKAGES

Sonrisas Dental Health celebrates the donors and the doers who make our nonprofit sector run. We are thrilled to host our annual Cooking for a Cause on September 17th! We expect over 150 guests for an exciting and uplifting program to celebrate the impact of philanthropy in our community. There will be ample opportunities to showcase your organization's sponsorship on printed materials that tell the story of Sonrisas Dental Health and encourage event guests to donate generously. Your partnership makes the event shine!



Sponsorship Benefits	Presenting \$20,000	Platinum \$10,000	Gold \$5,000	Silver \$2,500	Bronze \$1,500
Event Speaker Opportunity	3 minutes Scripted				
Event Emcee Recognition	Yes: Prominent	Yes	Yes		
Monthly Newsletter	Logo & Tagline	Logo	Listing		
Social Media Coverage	3 Pre-Event 1 Post Event	2 Pre-Event 1 Post Event	2 Pre-Event	1 Pre-Event	
Table of 10	2 Tables Front Row	2 Tables Front Row	1 Table Front Row	1 Table VIP seating	1 Table
Event Slide Recognition	Ad & Logo: Prominent	Ad: Prominent	Logo: Prominent	Logo	Listing
Event Program	Full Page Ad	Half Page Ad	Quarter Page Ad	Logo	Listing
Sonrisas Website	Home Page Logo + Platinum	Home Page Listing + Gold	Event Page Logo & Listing	Event Page Listing	Event Page Listing

Become an event champion and sponsor a specific aspect of the event! Your company name and logo can grace our cocktail reception or be a decor sponsor. Banner at the entrance to the event will let guests know you are the sponsor throughout the evening. Please reach out to us to discuss this special opportunity.



By completing, signing, and returning this form you are confirming your participation as a sponsor for this event and providing for Sonrisas Dental Health use: your company name, logo, and images as set forth in the recognition opportunities listed on this form. Platinum Sponsor \$10,000 Gold Sponsor \$5,000 Presenting Sponsor \$20,000 Other: \$ Bronze Sponsor \$1,500 Silver Sponsor \$2,500 COMPANY OR DONOR NAME, AS YOU WOULD LIKE IT TO APPEAR ON PRINTED MATERIALS: Primary Contact: Address (City, State, Zip):____ Email: _____ Website: ____ Telephone (Office): ______ Mobile: _____ Authorized Signature: _____ Date: _____ Print Name/Title: PAYMENT: My/Our check in the amount of \$______ is enclosed. Please charge \$______to my: Uisa American Express Discover Card Master Card Name on Card:

Card Number: _____ Exp. Date: ____ /___Security Code: _____