



SHINE A LIGHT: PRINTABLE SPONSORSHIP FORM

Yes! I want to help make recovery possible for people struggling with addiction by sponsoring the Shine A Light fundraiser for Mid-Michigan Recovery Services, Dec. 5, 2019.

NAME(S):

ADDRESS:

PHONE:

EMAIL:

LIFESAVER: \$20,000 and up.

LIGHT IN THE DARK: \$10,000-\$19,999.

NAVIGATOR: \$5,000-\$9,999.

LIGHTKEEPER: \$2,500-\$4,999.

FIRST STEP: \$1,000-\$2,499.

OTHER AMOUNT

SPONSORSHIP TOTAL:

\$ _____

HOW SPONSORSHIP SHOULD BE RECOGNIZED
(enter name or company name):

PAYMENT OPTIONS

A check for \$ _____, payable to Mid-Michigan Recovery Services, is enclosed.

Charge my credit card \$ _____ or Charge my card \$ _____ per month for _____ months

Card number: _____ Name of cardholder: _____

Billing ZIP Code: _____ Expiration: ____ / ____ Authorization code: _____

Please invoice me for \$ _____ If different from address above: _____

MAIL THIS FORM AND ANY PAYMENT TO:

Mid-Michigan Recovery Services, 913 West Holmes Road, Suite 200, Lansing, MI 48910

FAX: 517.887.8121 **EMAIL:** info@mmsinc.org

We look forward to seeing you Dec. 5, 2019. No physical tickets will be issued, but you will be contacted for your guest list. If you have questions about the event, our work or would like to arrange a tour, contact Susan Ziegler at 517.887.0226

THANK YOU FOR SHINING A LIGHT!