

THE SECOND ANNUAL
SHINE A LIGHT

**T A L E N T
S H O W**

**5:30 PM
SEPTEMBER
24**

**A FUNDRAISER TO BENEFIT
THE NONPROFIT, LIFESAVING WORK OF**



MID-MICHIGAN RECOVERY SERVICES

GET READY TO APPLAUD STARS OF RECOVERY!



WILX Anchor David Andrews is back as the emcee for the event, and WILX returns as exclusive media sponsor!

The joy of recovery deserves a creative outlet.

Rebuilding a new life deserves applause.

Join us as we celebrate both.

Our second annual Shine A Light Talent Show turns the spotlight onto the rich talent of the recovery community.

These are people who know what it means to fight for a better life. To rebuild what they lost. To restore connections with family. To find health and purpose and hope.

Strengthened by their experience, they bring profound performances to the stage.



SHINE A LIGHT SAVE A LIFE

Your sponsorship of this event provides vital funding and lifesaving help for your neighbors struggling with alcohol and drugs.

See the back page for the difference your sponsorship makes possible.

And then make plans to join us for an evening of inspirational performances:

WHEN: 5:30 P.M. THURSDAY, SEPT. 24

WHERE: THE PENTECOST CENTER, 316 MOORES RIVER DRIVE, LANSING

WHAT: APPETIZERS, FELLOWSHIP, PERFORMANCES, PRIZES AND FUN!

WHY: BECAUSE THIS IS HOW WE WIN THE BATTLE WITH DISEASES OF DESPAIR — BY GATHERING AS A COMMUNITY TO LAUGH, CRY AND CHEER TOGETHER FOR RECOVERY.

HOW TO BE A STAR

BECOME A SHINE A LIGHT SPONSOR!

Sponsorship levels, examples of services they could provide, and donor recognitions*

BRILLIANT BEACON: \$25,000	
Enough for 11 days of 24/7 care for all the women in residential treatment at Glass House	<ul style="list-style-type: none"> • Opportunity to co-emcee (limited to first two) • Opportunity to join the judges panel (limited to first four) • Acknowledgment from stage • Top billing on signs, programs, etc., "Sponsor Name/Logo Presents ... " • Name or logo on video slideshow at event • Name or logo on website and social media • Tickets to attend event: Unlimited
LEADING LIGHT: \$10,000	
Enough for five men or five women to receive a month of post-treatment recovery support, food and housing	<ul style="list-style-type: none"> • Opportunity to join the judges panel (limited to first four) • Acknowledgment from stage • Name or logo on signage, programs, etc. • Name or logo on video slideshow at event • Name or logo on website and social media • Tickets to attend event: 12
LEAGUE OF LIFESAVERS: \$5,000	
Enough for more than 100 Outpatient Services: one-on-one and group therapy, case management, etc.	<ul style="list-style-type: none"> • Opportunity to join the judges panel (limited to first four) • Name on signage, programs, etc. • Name on video slideshow at event • Name on website and social media • Tickets to attend event: 8
SHOW THE WAY: \$2,500	
Enough for 24 hours of post-treatment support and housing for every man and woman in Safe Harbor (capacity 36)	<ul style="list-style-type: none"> • Name on printed signage, programs, etc. • Name on video slideshow at event • Name on website • Tickets to attend event: 6
NEW DAWN: \$1,500	
Enough for nine days of residential treatment and 24/7 care for a man at Holden House	<ul style="list-style-type: none"> • Name on printed signage, programs, etc. • Name on website and social media • Tickets to attend event: 4

* To ensure inclusion in printed materials, sponsorships need to be confirmed by Sept. 17, 2026.



SHINE A LIGHT 2026: EVENT SPONSORSHIP FORM

NAME(S):

ADDRESS:

PHONE:

EMAIL:

SPONSORSHIP LEVELS

- BRILLIANT BEACON SPONSOR: \$25,000
 - Sign me up as co-emcee (limited to first 2)
 - Sign me up for judges panel (limited to first 4)

- LEADING LIGHT SPONSOR: \$10,000
 - Sign me up for judges panel (limited to first 4)

- LEAGUE OF LIFESAVERS SPONSOR: \$5,000
 - Sign me up for judges panel (limited to first 4)

- SHOW THE WAY SPONSOR: \$2,500

- NEW DAWN SPONSOR: \$1,500

- OTHER AMOUNT: \$ _____

SPONSORSHIP TOTAL:

\$ _____

HOW SPONSORSHIP SHOULD BE RECOGNIZED ON EVENT SIGNAGE, WEBSITE, ETC.
(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, 316 Moores River Drive, Lansing, MI 48910

FAX: 517.887.8121 EMAIL: info@mmsinc.org

OR DONATE SECURELY ONLINE AT: bit.ly/ourtime2shine

We will celebrate at our event Sept. 24, and will contact you with those details with you as they become available. If you have questions in the meantime or would like to arrange a tour, contact Abigail Court at 517.887.0226, ext. 103.