

Rewarding lives. Healthy communities.

"Where Every Day is the 4th of July"

August 12, 2017, 11 am—3 pm

Thomas Bull Memorial Park, 211 Route 416, Montgomery, NY

Summer fare will sizzle on the grill in a celebration of independence and the strength of the human spirit. By partnering with Access: Supports for Living in support of this event, you will help bring smiles to the faces of, and provide great memories for, hundreds of children and families with special needs.

Food~Games~Activities~Raffles~Entertainment

SPONSORSHIP OPPORTUNITIES



GOLD SPONSORS & ABOVE receive recognition in press release and on Access: Supports for Living Inc website, name/logo in all print including banner and program, and event tickets

Event Sponsor—\$5,000

Name Recognition as Premier Event Sponsor

-35 guests to attend event

Platinum Sponsor \$2,500 (3 options; circle one)

Food & Beverage Sponsor/Signage Sponsor/Entertainment Sponsor

-20 guests to attend event

Gold Sponsor—\$1,000

Name/logo in all print including banner and program

-12 guests to attend event

Silver Sponsor—\$500

Name on sponsor banner & program, 8 guests to attend

Bronze Sponsor—\$250

Name on sponsor banner & program, 6 guests to attend

Picnic Table Sponsor—\$100



-Signage with your name at Picnic Table, name in program, 4 guests to attend

Family Sponsor—\$50

-Name listed in program, 2 guests to attend event

To learn more about Access: Supports for Living and the services provided visit accesssupports.org

General Donation

\$5 / \$10 / \$25 / \$ _____

DONATE ONLINE
ACCESSSUPPORTS.ORG

For more information on sponsorships and how you can help, call (845) 692-4454, ext. 7127.

To register/donate to this event, please complete below and return to Saturday in the Park Event, c/o Access: Supports for Living Foundation Inc., 15 Fortune Road West, Middletown, NY 10941.

Checks should be made payable to Access: Supports for Living Foundation, Inc.

Name: _____ Company (if app.) _____

Address: _____

City _____ State _____ Phone: (____) _____

EMAIL ADDRESS: _____

(please complete email and phone in case we need to contact you with updates regarding this event.)**

Enclosed is my check for \$ _____ (payable to Access: Supports for Living Foundation, Inc.)

Charge my Visa MasterCard American Express

Card # _____ Exp. Date _____ Code _____

Card Holder Signature _____ Date _____

This event is proudly supported by the Access: Supports for Living Foundation, Inc, in support of the programs and services of Access: Supports for Living Inc., and is a separate charitable 501(c)(3) organization that is led by a volunteer Board of Directors. Tax ID # 20-04423.