



Saturday, December 7, 2024
Alta Vista Community | Greenville

SPONSORSHIP INFORMATION

Sponsor Name/Company Name *(as it should appear in printed materials)*

Sponsor Contact Name

Other Contact Name

Address
Zip Code

City

State

()

Contact #

()

Fax

Email Address

SPONSORSHIP COMMITMENT LEVEL

\$5,000 POINSETTIA SPONSOR

\$2,500 MERRY & BRIGHT SPONSOR

\$1,000 DECK THE HALLS SPONSOR

DONATION (Any Amount)

Amount: \$ _____

IN KIND - HOLIDAY SPIRIT SPONSOR

Description: _____

IN KIND - HOLIDAY CHEER DESIGNER

Description: _____

Please return this form with your contribution to: GCMSA, P.O. Box 26658, Greenville SC 29616
For questions, please contact alliance@gcmsa.org

Thank you for supporting the Greenville County Medical Society Alliance
The GCMSA is a registered 501(c)(3) nonprofit organization, federal tax ID 57-0790743
All contributions are tax-deductible as allowed by law.