

# Support Cardinal Cushing Centers

# RUN TO CHANGE LIVES

## VIRTUAL



## Run, Walk or Roll! Complete your miles for Cushing from 11/18-11/21

Though we are unable to gather together this year, we hope you will join us virtually in raising much needed funds for Cushing.

Register Online: [www.CCCTRunToChangeLives.org](http://www.CCCTRunToChangeLives.org)

## Sponsorship Levels

### \$5,000 Title Sponsor

- Top Billing on T-Shirt
- Logo displayed on virtual bibs created for event
  - Listed as Title Sponsor on website
  - Press and Social Media Coverage
- Opportunity to film special kick-off video announcing the event
  - (10) Event Shirts

### \$2,500 Bib Sponsor

- Logo displayed on virtual bibs created for event
  - Logo on event shirt
- Press and Social Media Coverage
  - (5) Event Shirts

### \$1,000 Virtual Swag Bag Sponsor

- Opportunity to share 'swag' to all virtual participants (coupons, discount codes, etc)
  - Logo on event shirt
- Press and Social Media Coverage
  - (2) Event Shirts

### \$500 Friend of Cushing

- Company Name featured on event website
  - Social Media Coverage



Contact: Ricky DeSisto at [RDesisto@cushingcenters.org](mailto:RDesisto@cushingcenters.org) or 781-829-1289

Follow Us: [www.CushingCenters.org](http://www.CushingCenters.org)



# RUN TO CHANGE LIVES Sponsorship Form

## Sponsor Today!

### Online at:

[www.CCCToChangeLives.org](http://www.CCCToChangeLives.org)

### Mail or E-mail Sponsor Form to:

Cardinal Cushing Centers  
Attn: Ricky DeSisto  
405 Washington Street  
Hanover, MA 02339

### Make checks payable to:

Cardinal Cushing Centers, Inc.

### Race Shirt Sizes:

Please contact Ricky DeSisto with sizes

**Contact:** [RDesisto@cushingcenters.org](mailto:RDesisto@cushingcenters.org) or  
781-829-1289

### Please check one:

- \$5,000 Run To Change Lives Title Sponsor
- \$2,500 Bib Sponsor
- \$1,000 Virtual Swag Bag Sponsor
- \$500 Friends of Cushing
- Donation \$ \_\_\_\_\_
- Total: \_\_\_\_\_

### Contact Information:

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### Payment Information:

Check  Credit Card

Name on card \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CSV code: \_\_\_\_\_

### Billing address if different then street address

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_