



Sponsor Registration Form

Business Name: _____

Contact Person: _____

Business Mailing Address: _____

Business Phone:	Cell Phone:	Fax Number:	Email Address:
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Yes, I am interested in sponsoring the **11th Annual Northumberland Hills Hospital Foundation's Gala** at the level indicated:

Platinum - \$10,000 – Includes ten (10) tickets to attend the Gala on November 12th, 2011

Gold - \$5,000 – Includes four (4) tickets to attend the Gala on November 12th, 2011

Silver - \$2,500 – Includes two (2) tickets to attend the Gala on November 12th, 2011

Supporter – \$ _____

Sponsorship Payment:

Cheque (Please make cheque payable to the **Northumberland Hills Hospital Foundation**)

Visa# _____

Master Card# _____

Expiry Date _____ Amount _____

***For information, please contact
Rhonda Cunningham, Executive Director
at 905-377-7767 or rcunningham@nhh.ca***

Please fax your registration as soon as possible to (905) 373-6936 or return by mail to:

**Northumberland Hills Hospital Foundation
1000 DePalma Drive
Cobourg, ON K9A 5W6**