



HAWAII THEATRE CENTER

FRIDAY NOVEMBER 3, 2017 7:00 PM

SPONSORSHIP FORM

Sponsorship Levels

INSPIRER \$25,000 20 TICKETS + DINNER*

MOTIVATOR \$20,000 16 TICKETS + DINNER*

ENCOURAGER \$10,000 12 TICKETS + DINNER*

SUPPORTER \$5,000 8 TICKETS

*Guests of Inspirer, Motivator and Encourager sponsors will be served a pre-show dinner at a restaurant, in walking proximity to the Hawaii Theatre.

I am unable to attend, but please accept my donation in the amount of \$

Payment Method: Check Visa MasterCard Discover 3% will added for credit card processing ~Mahalo

Credit Card No. Exp Date / CVV

First Name Last Name

Company Name

Address

City State Zip

Phone Email

CONTACT PERSON Check here if same as above

Name Phone Email

If paying by check, please send checks to:

ALOHA MEDICAL MISSION 810 N. Vineyard Blvd. Honolulu, HI 96817

For sponsorship inquires, please contact AMM Executive Director Toni Muranaka at (808) 847-3411 or at toni.muranaka@alohamedicalmission.org.

TO PURCHASE INDIVIDUAL TICKETS, VISIT WWW.HAWAII THEATRE.COM.