



Sponsorships Available

- Swan Lake Sponsor \$25,000
- Le Corsaire Sponsor \$10,000
- Sleeping Beauty Sponsor \$5,000
- Cinderella Sponsor \$2,500
- Backstage at the Ballet \$1,500
- Soloist (Individual Seat) \$175 Number of seats _____

Grand Total \$ _____

Method Of Payment

Check Enclosed in the amount of: \$ _____

NOTE: Please make check payable to "Florida Hospital Foundation"

Please invoice: _____

Please charge to credit card # _____

Name as it appears on card: _____

Expiration Date: _____ Visa Mastercard American Express

Company Name (or individual name if personal purchase only):

(Correct corporate or individual name)

Person to be thanked: _____

Title _____ Phone _____

Contact Name _____

Title _____ Phone _____

Address _____ Suite or Apt.# _____

City, State and Zip _____

Fax Number _____ Email Address: _____

Sponsor Signature _____ Date _____

(Please note: If reservation taken by phone – note name of person placing reservation)

Foundation Staff Signature _____ Date: _____

Mail to:

Florida Hospital Foundation, Attention – Celebrity Stroll
2710 N. Orange Avenue, Suite 200
Orlando, FL 32804
Fax to: (407) 896-1702