

AN *Evening* WITH
★GOLD MEDAL LEGEND★
MICHAEL PHELPS

Benefiting Texas Children's Cancer Center

Presented by



TUESDAY, MAY 16, 2017

The Hilton Americas - Houston

SPONSOR OPPORTUNITIES

GREATEST OF ALL TIME \$100,000

- Three premier reserved tables of 12 for 36 guests
- Thirty-six invitations to an exclusive reception with Michael Phelps
- Photo opportunity for 18 guests with Michael Phelps (*two guests per photograph*)
- Name listing on *An Evening with a Legend* donor wall located in Texas Children's Cancer Center
- Eighteen VIP valet parking passes
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$4,650

GOLD \$75,000

- Two reserved tables of 12 for 24 guests
- Twenty-four invitations to an exclusive reception with Michael Phelps
- Photo opportunity for 12 guests with Michael Phelps (*two guests per photograph*)
- Name listing on *An Evening with a Legend* donor wall located in Texas Children's Cancer Center
- Twelve VIP valet parking passes
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$3,120

SILVER \$50,000

- Reserved table for 12 guests
- Twelve invitations to an exclusive reception with Michael Phelps
- Photo opportunity for eight guests with Michael Phelps (*two guests per photograph*)
- Name listing on *An Evening with a Legend* donor wall located in Texas Children's Cancer Center
- Six VIP valet parking passes
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$1,560

BRONZE \$25,000

- Reserved table for 10 guests
- Ten invitations to an exclusive reception with Michael Phelps
- Photo opportunity for six guests with Michael Phelps (*two guests per photograph*)
- Name listing on *An Evening with a Legend* donor wall located in Texas Children's Cancer Center
- Five VIP valet parking passes
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$1,325

BUTTERFLY \$15,000

- Reserved table for 10 guests
- Ten invitations to an exclusive reception with Michael Phelps
- Photo opportunity for four guests with Michael Phelps (*two guests per photograph*)
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$1,325

FREESTYLE \$10,000

- Reserved table for 10 guests
- Invitation to the Legends Children's Party in Spring 2017
- Recognition on ballroom video screens
- Name listing in all printed materials and on event website
- Commemorative gift

Estimated fair market value: \$1,300

RELAY \$5,000 *Limited availability*

- Reserved table for 10 guests
- Recognition on ballroom video screens
- Name listing in all printed materials
- Commemorative gift

Estimated fair market value: \$1,300

INDIVIDUAL MEDLEY \$500 *Limited availability*

- One reserved seat
- Commemorative gift

Estimated fair market value: \$130

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RESPONSE FORM

Yes, I would like to attend *An Evening with Gold Medal Legend Michael Phelps* at the following level:

_____ **GREATEST OF ALL TIME**
\$100,000

_____ **GOLD**
\$75,000

_____ **SILVER**
\$50,000

_____ **BRONZE**
\$25,000

_____ **BUTTERFLY**
\$15,000

_____ **FREESTYLE**
\$10,000

_____ **RELAY**
\$5,000 *Limited availability*

_____ **INDIVIDUAL MEDLEY**
\$500 *Limited availability*

To have your name removed from our lists, call 832-824-6917 or email optout@texaschildrens.org.

Name or company name as it should appear in printed materials

Contact name

Address

City

State

ZIP

Daytime phone

Fax

Email

PAYMENT OPTIONS

- My enclosed check is payable to *Texas Children's Hospital*.
 My company's matching gift form is enclosed.

PLEASE CHARGE MY:

- Mastercard AMEX Visa Discover

Card number

Exp. date

Authorized signature

Date

_____ **DONATION ONLY:** I do not wish to accept any of the benefits offered at my giving level. *(Please sign below to affirm that you will take no benefits.) Signature required for tax-deduction purposes.*



Texas Children's
Hospital

PLEASE RESPOND BY MARCH 13 TO BE INCLUDED IN PRINT MATERIALS

MAIL Texas Children's Hospital
1919 S. Braeswood Blvd., Ste. 5214
Houston, Texas 77030

EMAIL
Kelley Hernandez
legends@texaschildrens.org

PHONE 832-824-6917
FAX 832-825-1119