



# Individual Annual Sponsorship Opportunities and Recognition Package

Thank you for being a partner in our work and mission to empower people with ALS to Live Every Day with

**purpose. joy. hope.**



We help people with Amyotrophic Lateral Sclerosis (ALS) by providing home care services, resources, Joe's Camp (for kids from families touched by ALS), caregiver training and more, *entirely free of charge*.

**Your committed support helps us continue our mission as a consistent presence in the community.**

During COVID-19, thanks to you, we have remained a reliable resource and support system for people navigating this complex disease and who may be further isolated due to the pandemic.

**We would like to invite you to join us this year as we step into the lives of our beneficiaries and their families, ensuring they can Live Every Day with **purpose, joy, and hope.****

Below, we list the many ways you can choose be part of our work, the impact you will make, and how we hope to highlight your contributions through meaningful recognition.

**We invite you to review the opportunities listed below and we thank you for considering joining our mission.**

Live Every Day 2020 Sponsorship Tier	Individual Recognition Package					
	Name featured on event webpage; annual report and electronic event materials	Name featured on event launch webpage, social media posts and event materials	Name featured in event program; and post-event recognition (print & electronic)	Name, logo featured in event invitation and press releases to media. Ongoing updates about your gift's impact.	Name featured on gift(s) provided to all virtual and small group guests	Personalized story feature about your gift and its impact published in social media, newsletters, media & print in 2020-2021
Legacy Circle \$10,000+	✓	✓	✓	✓	✓	✓
Your <b>Legacy Circle Sponsorship</b> covers the costs of <ul style="list-style-type: none"> <li>one year of full coverage of in-home care for <b>two individuals or families</b> affected by ALS.</li> <li>ten in-home assessments, to equip individuals and families affected by ALS who need to retrofit their home to accommodate caregiving and mobility-related equipment.</li> </ul>						
Gift of Joy \$5,000+	✓	✓	✓	✓		
Your <b>Gift of Joy</b> covers the costs of <ul style="list-style-type: none"> <li>one full year of in-home care for <b>one individual or family</b> affected by ALS.</li> <li>Six months of wheelchair transportation and logistics support, caregiver advice and support as needed for multiple individuals or families navigating ALS.</li> </ul>						
Gift of Love \$2,500+	✓	✓	✓			
Your <b>Gift of Love</b> covers the costs of <ul style="list-style-type: none"> <li>Six months of in-home caregiving for <b>one individual or family</b> affected by ALS</li> <li>Six months of wheelchair transportation and logistics support, caregiver advice and support as needed for multiple individuals or families navigating ALS.</li> </ul>						
Gift of Hope \$500+	✓					
Your <b>Gift of Hope</b> covers the costs of <ul style="list-style-type: none"> <li>One month of in-home care for <b>one individual or family</b> navigating ALS.</li> <li>Five in-home assessments to equip individuals and families affected by ALS who need to retrofit their home to accommodate caregiving and mobility-related equipment.</li> </ul>						

Yes, I would like to partner in the mission of The Joe Martin ALS Foundation with a:

\_\_\_\_\_ Legacy Sponsorship - \$15,000+

\_\_\_\_\_ Gift of Joy - \$5,000+

\_\_\_\_\_ Gift of Love - \$2,500+

\_\_\_\_\_ Gift of Hope - \$500+

**Specific Amount: \$** \_\_\_\_\_

\_\_\_ Donation made online at [www.joemartinalsfoundation.org/donate/](http://www.joemartinalsfoundation.org/donate/)

\_\_\_ Please send me an invoice

\_\_\_ Check enclosed

\_\_\_ Credit Card: *(Please write credit card information here and associated address below. We will never share your information.)*

Card Number: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_ CVV \_\_\_\_\_

Individual/Organization/Company

*(please note we offer a slightly different package for corporate sponsors. See our donation page online for more information – address below)*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

**Gift made in Memory Of:** \_\_\_\_\_

*(we will notify the family or individuals specified above about your gift and its impact)*

**Please Return To:**

The Joe Martin ALS Foundation  
100 N. Tryon Street, Suite 3420, Charlotte, NC 28202  
704-332-1929

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

