

2022 Nightingale Gala

Sponsorship Form

Call (518) 456-7858, ext. 125 for more information

[] Innovator*	\$10,000 - Includes two (2) tables of ten (10) and center page p	rogram ad (2 full pages)
[] Crafter	\$ 5,000 - Includes one table of ten (10) and full page program ad	
[] Music Sponsor*	\$ 3,000 - Includes six (6) tickets and full page program ad	
[] Photography Sponsor*	\$ 2,000 - Includes four (4) tickets and full page program ad	
[] Cultivator	\$ 1,500 - Includes four (4) tickets and half page program ad	
[] Curator	\$ 500 - Includes two (2) tickets and quarter page program a	nd
*This sponsorship level is exclusive to one organization/business/individual.		
All sponsors will be listed on our website, the invitation and recognized at the Gala.		
Please check your sponsorship level above		
Organization / Business:		
Contact:		
Address:		
City:	State:	_ Zip:
Telephone #:	Email:	
Check Enclosed (made payable to Foundation of NYS Nurses, Inc.)		
Please charge my credit card: C	Exp:Exp:	CVV:

Please return this form with your payment to:

Center for Nursing at the Foundation of NYS Nurses, Inc., 2113 Western Avenue, Guilderland, NY 12084

Telephone (518) 456-7858

Fax (518) 452-3760

Email: kblanchard@cfnny.org