

Toledo Mission Partners

Our Partners have an opportunity to make a difference while connecting with others, meeting Mercy Health leaders, and learning about important Toledo area programs and projects. Recognition of Toledo Mission Partner members is shared in a variety of ways. *Join us to make a difference for our friends, family, and neighbors.*

PARTNER RECOGNITION	\$20,000	\$10,000	\$5,000
You will be a featured sponsor of two Foundation gatherings with C-Suite leaders. Discussions may include hospital information and updates as well as pressing issues in our community.	✓		
Give to your choice of Community Health Initiatives or let your gift be unrestricted	✓	✓	
Featured sponsor of our 3 rd quarter annual appeal. Your gift will be used as a match and you will be recognized as a “Friend of the Foundation” on the Toledo market solicitation mailed to about 6,000 homes, used in emails and on social media.	✓	✓	✓
Greater Toledo Golf Events: Tiffin, Willard, and Toledo with appropriate recognition	12 players can be used among the three outings	8 players can be used among two outings	4 players Can be used at one outing or as a twosome at two outings
Donor Appreciation Event/Holiday Party	✓	✓	✓
Tours of programs: February-Neuro- St. Vincent Medical Center 2/21 March-Heart and Vascular-Perrysburg Hospital 3/20	✓	✓	✓

Foundation Activities

DATE	TIME	LOCATION
Variety of Tours	2/21, 3/20	various
Breakfast with Leadership	April TBD	7:30
Toledo Golf Outing	June 21	8:30 shotgun start
Willard Golf Outing	June 26	8:30 shotgun start
Tiffin Golf Outing	Aug 5	9:00 shotgun start
Winter Mission Partner Gathering	TBD	4:30 pm
Holiday Gathering	Nov/Dec	5:30pm
		hospital locations
		TBD
		Toledo Country Club
		Eagle Creek Golf Club
		Mohawk Golf and Country Club
		TBD
		TBD

Event recognition and opportunities vary at each event. Please contact the Foundation office at 419-251-2117 or fdntoledo@mercy.com for specific information or requests.



Toledo Mission Partner SPONSORSHIP FORM

TOTAL GIFT AMOUNT: \$ _____ .00

You support community health initiatives that interest you-please mark your priority!

Choose one community health initiative that you want to support:

____ Mobile Mammography ____ Champions for Children ____ scholarships for Mercy College
____ your own priority ____ unrestricted- let the Foundation use your gift for the greatest need!

Golf Outings

How will you use your players:

at _____ Randy Kordash Golf Classic-Toledo

June 21, Toledo Country Club - 3949 River Rd., Toledo, Registration & Breakfast 7:30 a.m.; Shotgun Start 8:30 a.m.

at _____ Willard Golf Outing

June 26, Eagle Creek Golf Club - 2406 New State Rd., Norwalk, Registration 7:30 a.m.; Shotgun Start 8:30am

at _____ Walter A. Daniel MD Golf Outing- Tiffin

August 5, Mohawk Golf & Country Club - 4399 State Route 231, Tiffin, Registration 8:00 a.m.; Shotgun Start 9:00 a.m.

SPONSOR INFORMATION

Company Name (Printed as you wish it to appear)

Contact Name / Title

E-mail Address

Billing Address

City, State, Zip

Telephone

Fax

PAYMENT OPTIONS

Amount: \$ _____

____ Check enclosed ____ Please bill me ____ Other _____

PLEASE MAKE CHECK PAYABLE TO: **MERCY HEALTH FOUNDATION**, 2525 Cherry Street, Toledo, OH 43608

OR to pay by Credit Card, please call 419-461-1768

OR visit: <https://foundation.mercy.com/toledo> Under comments: TOLEDO MISSION PARTNER