Pediatric Lyme Foundation
A Night at the Theatre
Saturday, October 14, 2017
Sponsor Form

Name of Sponsor: ________________________

Sponsorship Level:
☐ Orchestra Sponsor-$250  ☐ Backstage-$100  ☐ Mezzanine-$50
☐ Other Amount: ________________

Kiwanis Club Affiliation (if applicable): ________________

Phone Number: _____________________________

Email Address: _____________________________

Please direct the completed form with enclosed check made payable to “Pediatric Lyme Disease Emergency Relief Fund Foundation” to the attention of:
    Jeanne M. Egan-Canning
    Board Member/Event Organizer
    30 Pearsall Ave
    Unit 3D
    Glen Cove, NY 11542

If you have any questions, please feel free to contact Jeanne at post2004@att.net or 516-353-8325. If you are interested in sitting next to someone during the performance that will be mailing their request in separately, please let us know and we will try to accommodate your request. We will also select payment the night of the performance.