



# Prevent Blindness

Our Vision Is Vision.

## 2023 PEOPLE OF VISION AWARD EVENT SPONSORSHIP FORM

Yes! I want to honor the outstanding leadership of Mark Peacock and Encova Insurance and help in the fight against blindness by participating in the 2023 People of Vision Award event from 5:30 p.m.-8:00 p.m. on March 29, 2023 at Heritage Golf Club, 3525 Heritage Club Dr., Hilliard, OH 43026.

	Table Seats	Program Book Ad	Company Logo in Program Book	Vision Screening / Education Hours	Marketing as Premier Sponsor	Community Benefits from Sponsorship
<b>Premier Sponsor- \$10,000</b> (\$9,240 donation/\$760 goods/services provided)	8	Full-Page	✓	4	✓	20 people receive an eye exam & glasses; 500 children receive a sight saving vision screening
<b>Friends of the Honoree/Chair Sponsor- \$5,000</b> (\$4,440 donation/\$560 goods/services provided)	8	Full-Page	✓	4		10 people receive an eye exam & glasses; 250 children receive a sight saving vision screening
<b>Patron Sponsor -\$3,500</b> (\$2,940 donation/\$560 goods/services provided)	8	Half-Page	✓	2		7 people receive an eye exam & glasses; 150 children receive a sight saving vision screening
<b>Corporate Sponsor -\$2,000</b> (\$1,440 donation/\$560 of goods/services provided)	8	Half-Page				5 people receive an eye exam & glasses; 100 children receive a sight saving vision screening
<b>Vision Sponsor- \$800</b> (\$660 donation/\$140 goods/services provided)	2					75 children receive a sight saving vision screening
<b>Individual Seat- \$400</b> (\$330 donation/\$70 of goods/services provided)	1					40 children receive a sight saving vision screening

Donation (enter amount) \$ \_\_\_\_\_  
(No goods/services provided)

### Contact Information

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

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### Payment Information

Invoice Me      Check is Included  
Charge my Credit Card (complete info below)

Amount to Charge: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card #: \_\_\_\_\_

Billing Zip: \_\_\_\_\_ Signature: \_\_\_\_\_

Send completed form to: [tracyn@pbOhio.org](mailto:tracyn@pbOhio.org); Phone: 800-301-2020, Ext 152

Checks should be made payable to Prevent Blindness and mailed to Prevent Blindness, 1500 W. Third Avenue, Suite 200, Columbus Ohio 43212.

NOTE: Tickets will not be sent. Receipt of your pledge or check assures your reservation. Business attire.