



# THE ST. LOUIS FIRE DEPARTMENT FOUNDATION

Legends & Lifesavers Event  
 April 4<sup>th</sup>, 2019  
 The Chase Park Plaza – Starlight Room

	<b>Friend</b>	<b>Dispatcher</b>	<b>First Responder</b>	<b>Lifesaver</b>	<b>Legend</b>
	<b>\$1,500</b>	<b>\$2,500</b>	<b>\$5,000</b>	<b>\$10,000</b>	<b>\$25,000</b>

	Friend \$1,500	Dispatcher \$2,500	First Responder \$5,000	Lifesaver \$10,000	Legend \$25,000
Table for 10, Reception and Dinner	1 Table	1 Table	1 Table	1 Table	2 Tables
Recognition from podium during the event		•	•	•	•
Your name, company name & logo on slide screen during event	•	•	•	•	•
Valet parking for all table guests					•
Recognition in all pre-event press and social media			•	•	•
Placement of your name, company name and logo on invitations if received by (determine date)		•	•	•	•
Recognition in St. Louis Business Journal Giving Guide	•	•	•	•	•
Event Program Ad	1/8 Page	1/4 Page	1/4 Page	1/2 Page	Full Page
Recognition in Foundation newsletter	•	•	•	•	•
Personalized table signage	•	•	•	•	•
Logo (or name) recognition on event website	•	•	•	•	•
Support of the St. Louis Fire Department Foundation with tax-deductible donation	•	•	•	•	•

**Sponsorship deadline: January 18<sup>th</sup>, 2019**



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**YES! I would like to become a sponsor.**

**Please count me in before the January 18<sup>th</sup> deadline!**

Name (Company/Group): \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

For recognition purposes, please list my/our name as: \_\_\_\_\_

**I want to help St. Louis Fire Department Lifesaving Foundation save more lives with my sponsor gift of:**

- |  |   |
|--|---|
| <input type="checkbox"/> Legend Sponsor \$25,000         | <input type="checkbox"/> Dispatcher Sponsor \$2,500 |
| <input type="checkbox"/> Lifesaver Sponsor \$10,000      | <input type="checkbox"/> Friend Sponsor \$1,500     |
| <input type="checkbox"/> First Responder Sponsor \$5,000 |   |

**We are unable to participate as a sponsor this year, but please accept our gift of: \$** \_\_\_\_\_

- I / We will attend the event on **Thursday, April 4<sup>th</sup>, 2019**

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## Payment Method:

- Enclosed is my check, payable to **St. Louis Fire Department Foundation**
- Please send an invoice
- Please charge my:       Visa                       Mastercard                       AMEX

Card No. \_\_\_\_\_ Expires \_\_\_\_\_ V-Code \_\_\_\_\_

*Thank you for your participation and generous support!*

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**Register online at [www.stlfdfoundation.org](http://www.stlfdfoundation.org)**

or

**Mail completed form to:**

**St. Louis Fire Department Foundation**

**P.O. Box 31218**

**St. Louis, MO 63131-0218**

## Questions?

Contact: [info@lifesavingfoundation.org](mailto:info@lifesavingfoundation.org)

Laura Keller

Executive Director

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Aaren Muex

Event Planner

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