

MARY BIRD PERKINS CANCER CENTER IN HAMMOND

Geaux Yoga: A Celebration of Life honors all the brave individuals impacted by cancer in our community through a free, fun and relaxing yoga class presented by Downtown Yoga from 9 – 11 a.m. After the class, participate in preventative cancer screenings and a butterfly release.

MARCH 23, 2024 | 9 A.M. | CATE SQUARE PARK

100% OF PROCEEDS TO BENEFIT PATIENTS AND SUPPORT SERVICES AT MARY BIRD PERKINS CANCER CENTER IN HAMMOND, INCLUDING TRANSPORTATION ASSISTANCE, OUT-OF-POCKET MEDICAL EXPENSES AND FREE COMMUNITY SCREENINGS.

WARRIOR // \$3,500

Provide education and early detection through free screenings in your community

- Opportunity for exclusive radio interview as presenting sponsor
- · Opportunity to speak on stage at event
- · Logo included in print promotions
- Unique, specialized social media promotion opportunity
- Name inclusion on event website
- Name inclusion in event promotional emails
- Verbal recognition throughout the event
- Sponsor can bring a 10x10 tent to the event

ZEN // \$1,000

Provide transportation assistance for eight patients throughout the duration of their treatment

- Logo included in print promotions
- Unique, specialized social media promotion opportunity
- Name inclusion on event website
- Name inclusion in event promotional emails
- Verbal recognition throughout the event
- Sponsor can bring a 10x10 tent to the event



BALANCE // \$500

Supply 15 patients with nutritional supplements & support from a registered dietitian

- Name inclusion on event website
- Name inclusion in event promotional emails
- Verbal recognition throughout the event
- Social media recognition pre/post event





Scan the QR code to make an impact!



For more information, please contact **Emily Simons** at **(985) 276-6808** or **esimons@marybird.com**





2024 SPONSORSHIP FORM

SATURDAY, MARCH 23, 2024 // 9 A.M. CATE SQUARE PARK • HAMMOND

MARY BIRD PERKINS CANCER CENTER IN HAMMOND

SPONSOR NAME:				
		(as it should appear in p		
CONTACT NAME:	_		TITLE:	
MAILING ADDRES	S:			
CITY, STATE & ZIP	:			
PHONE NUMBER:			FAX:	
EMAIL:			WEBSITE:	
☐ YES, I WISH TO \$3,500 ☐ \$1,000 ☐ \$500	WARRIOR ZEN BALANCE	2024 YOGA EVEN [™]	\$	
COMPANY LOGO & ARTWORK	(if applicable based	d on sponsored level)	or company logo and artwork Phone:	
PAYMENT	☐ Charge To: Name on Card: Account Number: ☐ I wish to be billed	☐ Today ☐ on _	e to Mary Bird Perkins Cancer Cent CVV: Exp. Date: date monthly installments beginning ved by the date of the event	_
full payment must be re		the full benefits of my sp	the date of the event selected. I understand consorship. A signed form must be returned	

To ensure proper recognition in printed materials, please complete form in its entirety and send to: