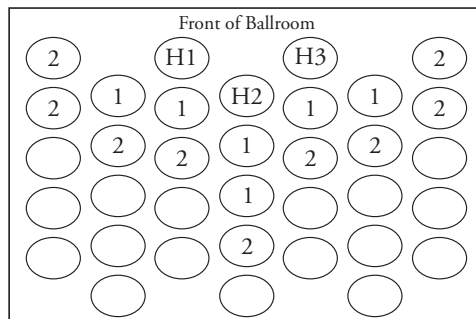


SPONSOR PLACEMENT

Join us on Thursday, April 5, 2018 – Little America Hotel, Salt Lake City, Utah

H1, H2, and H3 =

Head tables for
honoree and
honoree's guests



Location #1

\$10,000 – (Only 6 Available)
1 Complimentary table for 10 guests
Acknowledgement in program

Location #2

\$5,000 – (Only 9 Available)
1 Complimentary table for 10 guests
Acknowledgement in program

SPONSOR COMMITMENT

Yes, I would like to be counted among the sponsors to recognize Donald B. Doty, MD, Cheryl J. Doty, C. Gregory Elliott, MD, and Robert Corcoran at the 2018 Legacy of Life Dinner and Gala on Thursday, April 5, 2018, at Little America Hotel in Salt Lake City, Utah.

I/We would like to sponsor at: ☐ \$10,000 (10 seats) ☐ \$5,000 (10 seats)

Sponsor Name: _____

Name to appear in program, if different: _____

Address: _____ Email: _____

Phone: _____ Fax: _____ Contact: _____

Non-sponsored tables are also available for \$1,500 and individual seats for \$150.

*These do not receive priority placement or recognition.

☐ I/We would like to buy _____ Table (s) for \$1,500 per table of 10.

☐ I/We would like to buy _____ Individual Seats for \$150 each.

☐ I/We cannot attend, but are enclosing a donation of \$ _____.

FORM OF PAYMENT

☐ Check Enclosed – *Make checks payable to: Intermountain Research and Medical Foundation*

☐ Credit Card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

☐ Invoice Me

Amount \$ _____ Card Number _____

3-Digit SEC Code _____ Expiration Date _____

Name On Card _____ Phone # _____

Signature _____ Date _____

**Please mail or fax this
Sponsor Commitment
form with your
payment to:**

Intermountain Research
and Medical Foundation
Attn: Legacy of Life
5121 S Cottonwood Street
Murray, UT 84157
Phone: 801.507.5216
Fax: 801.507.5140