



5-22-2010



Dear Friends of Mountain Valley Hospice:

We are writing to request your company's support of our 10th annual "Tour de Mayberry" cycling event scheduled for **May 22, 2010**. This year we will be adding a 5k run to mix up things and to celebrate our tenth year for this event. The event will still have the three routes as before so that our faithful cyclists can still have their adventure through Mount Airy and Surry County.

We anticipate that adding the 5k run will bring an additional couple of hundred people to our event. This will give more opportunity for you as a sponsor to receive recognition for your sponsorship gift.

In years past, we have had an average of 150 cyclists to participate in this event. Each year we print and distribute over 3,500 brochures and 400 T-shirts, in addition to having over 3,000 visitors to our event website. Please refer to the website, www.tourdemayberry.net, for specific information about the rides, the run, and our sponsor page.

Mountain Valley Hospice and Palliative Care is a non-profit 501(c)(3) organization that began providing services to the terminally ill in 1983. We are currently reimbursed through Medicare, Medicaid, and most private insurance companies. Services are provided regardless of an individual's ability to pay. It is our goal to meet the needs of all our patients regardless of their ability to pay for services. To cover the additional cost of care, we depend on community donations and fundraisers such as the Tour De Mayberry. With the Woltz Hospice Home open and taking patients, donations and fundraising are needed more than ever to meet this ongoing need.

Please review the attached information and return, if you are interested in being a sponsor. **Please note that we are facing some deadlines for finalizing certain advertising, so your prompt response is requested.** The deadline is **April 15th 2010**, just like your taxes. However, keep in mind that the sooner you get it in the sooner you can reap the benefits of the advertising.

We certainly hope that we can count on your support of this event. Please complete the attached sponsorship form and return along with your check (if applicable) and company logo to our office. Please give us a call, if you have questions.

Sincerely,

Sheila Jones
Tour De Mayberry Committee
Director of Development

401 Technology Lane · Suite 200 · Mount Airy, NC 27030 · 336.789.2922

Tour de Mayberry Ride & Run Sponsorship Form

\$1,000.00

Company Name and Logo on Large Individual Banner to be displayed at the Event
Company Name and Logo on Event Website with a link to your website or email address
Company Name and Logo on sign at each rest stop for 100 or 44 mile ride (choose one route)
Company Name and Logo on back of Event T-Shirt
Four Individuals from your company can ride/run free and receive event T-shirts

\$750.00

Company Name and Logo on Medium Individual Banner to be displayed at the Event
Company Name and Logo on Event Website with a link to your website or email address
Company Name and Logo on sign at the rest stop for 19 mile ride or 5K run (choose one)
Company Name and Logo on the back of Event T-shirt
Two individuals from your company can ride/run for free and receive event T-shirts

\$500.00

Company Name and Logo on Individual banner to be displayed at the Event
Company Name and Logo on Event Website
Company Name and Logo on the back of Event T-Shirt
One Individual from your company can ride/run free and receive an event T-Shirt



Sponsorships for smaller amounts are greatly appreciated as we know that not all businesses cannot sponsor at the corporate level. Please indicate the amount or the items that you will be able to donate or call Sheila Jones to discuss what other sponsorship options may be available. We appreciate your support for this fundraising event and all proceeds will be used to help with the care of terminally ill patients and their families. Sponsors are what make our event a success!

If you choose to sponsor this event, please send the following:

- 1) Check in the appropriate amount payable to **Mountain Valley Hospice and Palliative Care**.
- 2) Email a copy of your logo to: sjones@mtnvalleyhospice.org or mail a copy to the address below.

Please forward these items to: **Mountain Valley Hospice and Palliative Care**
Tour de Mayberry
401 Technology Lane • Suite 200
Mount Airy, NC 27030

For questions or concerns, please call Sheila Jones at (336) 789-2922.

Please return this form and complete the information below.

Company Name: _____

Address: _____

Contact Name: _____ Phone: _____

Contact Email address: _____ Link for website: _____

Sponsorship Level (please check the appropriate space)

\$1,000.00 _____ \$750.00 _____ \$500.00 _____ Other _____

Please split my sponsorship into: Monthly payments of \$ _____ or Quarterly payments of \$ _____

Signature: _____ Date: _____