

Nightingale Awards of Pennsylvania (NAP) Gala Sponsorship & Contribution Opportunities 2023

Contributions must be received by September 18, 2023 to be included in the Gala program.

All contributors support NAP's mission to recognize excellence in a wide variety of nursing career paths and financially contribute to the educational advancement of nurses at all levels in the Commonwealth of PA.

Become a Sponsor, or contribute at the Diamond or Platinum level, by July 31, and your organization's logo will appear on the Gala invitation RSVP card. More than 1,000 invitations will be mailed in August to nurses, health care professionals and NAP friends.

SPONSORSHIP OPTIONS

Award Sponsorships: \$5,500 per category

- Award Sponsors will be underwriting the award finalists and their guests' attendance at the Gala, as well as contributing toward the production costs of the Gala, including the cost of the crystal award for the category.
- **Sponsors will receive:** 8 Gala seats, recognition during the Gala with signage, including company logo, and a full-page acknowledgment (which you create) in the Gala program book.

Select	Award	Select	Award
	Advanced Practice RN		Nursing Administration - Leader/Manager
	Clinical Practice RN		Nursing Education - Academia
	Clinical Practice LPN		Nursing Education - Staff Development
	Community Nursing		Nursing Research
	Doctorate of Nursing Practice (DNP)		Nursing Administration - Executive/CNO
	Patient Choice – Individual Nurse Award		Patient Choice – Team Award

Award Categories: please indicate which award you wish to sponsor.

Scholarship Sponsorships: \$4,500 per category

- Scholarship Sponsors will be underwriting the scholarship recipient for the Gala and contributing toward the scholarship award and the production costs of the Gala.
- **Sponsors will receive:** 4 Gala seats, recognition during the Gala with signage, including company logo, and a half-page acknowledgement (which you create) in the Gala program book.

Scholarship Categories: please indicate which scholarship you wish to sponsor.

Select	Scholarship	Select	Scholarship
	Advanced Degree - Doctoral		Diploma
	Advanced Degree - Masters		Licensed Practical Nursing
	Bachelor of Science in Nursing		Associate Degree in Nursing
	Bachelor of Science in Nursing-Completion Degree		Advanced Degree - PhD

This form will be updated on our website, www.NightingaleAwards.org, to reflect the sponsorships that have been sold to date.

Pay by Credit Card: Visit <u>https://www.nightingaleawards.org/support-us</u> and complete the online form. Pay by Check: Complete this form and make checks payable to Nightingale Awards of Pennsylvania. Mail To: 1231 Highland Ave | Fort Washington, PA 19034 Email Ads or Questions: Kathy – info@nightingaleawards.org

CONTRIBUTION OPTIONS (separate from Sponsorships):

Please indicate at which level and amount you wish to contribute.

\$	Diamond Level – Contribution of \$5,000 or more				
	 Receives 8 Gala seats, recognition on the NAP website, on signage at the Gala and in the program, and a full- page acknowledgement (which you create) in our Gala program book. 				
\$	Platinum Level – Contribution of \$3,000 - \$4,999				
	 Receives 4 Gala seats, recognition on the NAP website, on signage at the Gala and in the program, and a half- page acknowledgement (which you create) in our Gala program book. 				
\$	Gold Level – Contribution of \$1,500 - \$2,999				
	• Receives 2 Gala seats, and recognition on the NAP website, on signage at the Gala and in the program book.				
\$	Silver Level – Contribution of \$150 - \$1,499				
	• Receives recognition on the NAP website, on signage at the Gala and in the Gala program book.				
\$	Nightingale Level – Contribution of \$30-\$149				
	• Receives recognition on the NAP website, on signage at the Gala and in the Gala program book.				
\$	Jayne Felgen Scholarship Fund – Any Amount				
	 Ms. Felgen was the founding member of NAP and continues to serve on the Board of Trustees as President Emeritus. The purpose of this fund is to provide support generally for scholarships as the Board may determine. 				
	 Contributors to this fund will receive recognition on the NAP website, on signage at the Gala and in the program book. 				
Conside	r contributing "in honor of" or "in memory of" someone. Circle "honor" or "memory" and place name				

here, as you'd like it to appear: ______

Gala Program Book Acknowledgements:

- Complete this section if you want to purchase space in the Gala program book to acknowledge a nurse, promote your organization, etc. You do not need to complete this section if a program book acknowledgement is included with the sponsorship or contribution level you chose above.
 - You'll need to create the ad and send to us via email (in .jpeg or .pdf format) by Sept. 19.
- Choose: Full Page (5.5"W x 8.0"H) -- \$350 _____ or Half Page (5.5"W x 3.5"H) -- \$250 _____

SPONSOR/CONTRIBUTOR INFORMATION

Amount Due: \$	
Organization/Individual:	
Who is the sponsor/contribu	tor? Please print clearly, as you would like the name to appear in marketing.
Contact Person (if different from above): _	
Address:	
City/State/Zip:	
Phone:	Email:
Signature:	

Contributions made to NAP are tax deductible to the extent permitted by law. THANK YOU FOR YOUR SUPPORT!