

SMA HEALTHCARE FOUNDATION'S
INAUGURAL

Gala of Light

SATURDAY, NOVEMBER 8, 2025

HAMMOCK BEACH RESORT
200 OCEAN CREST DRIVE | PALM COAST

**INTENT TO
SPONSOR**

DONOR/COMPANY NAME: _____

CONTACT NAME/TITLE: _____

(SMAF WILL USE THIS CONTACT FOR FOLLOW UP ON DETAILS RELATED TO BENEFITS AS A SPONSOR)

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

WEBSITE: _____ FACEBOOK: _____

PLEASE CHOOSE YOUR SPONSORSHIP LEVEL (CIRCLE ONE)

PRESENTING (\$50,000)

SPOTLIGHT (\$25,000)

STARLIGHT (\$10,000)

CANDLELIGHT (\$5,000)

SPARK (\$2,500)

_____ CHECK HERE IF INTERESTED IN A CUSTOMIZABLE
SPONSORSHIP OPTION

PLEASE INDICATE BILLING (CIRCLE ONE):

CHECK ENCLOSED

INVOICE US

CHECKS PAYABLE TO : SMA HEALTHCARE FOUNDATION

CREDIT CARD

NAME AS IT APPEARS ON CARD: _____

CARD #: _____ EXPIRATION DATE: _____

CVV: _____ AUTHORIZED SIGNATURE: _____

BILLING ADDRESS (IF DIFFERENT THAN MAILING ADDRESS ABOVE):

INSTRUCTIONS:

- SUBMIT COMPLETED FORM TO MELISSA GABRIEL AT MGABRIEL@SMAHEALTHCARE.ORG OR TO SMA HEALTHCARE FOUNDATION, 150 MAGNOLIA AVENUE, DAYTONA BEACH, FL 32114
- E-MAIL YOUR LOGO IN A HIGH RESOLUTION FORMAT TO MGABRIEL@SMAHEALTHCARE.ORG
- PLEASE "LIKE" US ON FACEBOOK AT [HTTPS://WWW.FACEBOOK.COM/SMAHEALTHCAREFOUNDATION/](https://www.facebook.com/SMAHEALTHCAREFOUNDATION/)

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**SPONSORSHIP
OPPORTUNITIES**

SPONSORSHIP LEVELS & BENEFITS	PRESENTING \$50,000	SPOTLIGHT \$25,000	STARLIGHT \$10,000	CANDLELIGHT \$5,000	SPARK \$2,500
SPONSOR/BUSINESS NAME AND LOGO FEATURED ON EVENT WELCOME SIGNAGE AT ENTRANCE OF THE EVENT	*				
PREMIER TABLE, WITH OPTION OF UPGRADING TO TABLE WITH SEATING FOR 10	*	*			
RECOGNITION (WITH LOGO) ON SMA FOUNDATION WEBSITE	*	*	*		
TABLE WITH SEATING FOR 8	3	2	1	1	1/2
SPONSOR/BUSINESS NAME AND LOGO FEATURED ON ALL EVENT MATERIALS	*	*	*	*	*
SPONSOR/BUSINESS NAME AND LOGO FEATURED ON ALL EVENT SIGNAGE	*	*	*	*	*
ACKNOWLEDGEMENT DURING EVENT AT SPONSORSHIP LEVEL	*	*	*	*	*
ACKNOWLEDGMENT IN PRESS RELEASE	*	*	*	*	*
NAME/LOGO RECOGNITION ON TABLE SIGNAGE	*	*	*	*	*



SMA Healthcare Foundation Federal ID: #59-3496645

A copy of the official registration and financial information may be obtained from the Florida Department of Agriculture and Consumer Services/Division of Consumer Services by calling toll-free 800-435-7352 within the state or via their website at www.freshfromflorida.com/Divisions-Offices/Consumer-Services. Registration does not apply endorsement, approval, or recommendation by the state.