

FESTIVAL OF TREES

Thanksgiving Weekend

November 28 - 30, 2025

GALA AND AUCTION - FRIDAY, NOVEMBER 28, 2025, 6 P.M.

Saint Joseph Center, 215 N. 15th St. Mount Vernon, WA

2025 SPONSORSHIP EVENT PACKAGES

FESTIVAL TITLE SPONSOR - \$10,000 Sponsor logo to appear on all Festival promotional materials.
The ticket package includes: 8 Gala and 25 Family Festival Days tickets

BENEFACTOR SPONSORS - \$5,000 each

Sponsor logo to appear on Festival promotional materials.

The ticket package includes: 6 Gala and 10 Family Festival Days tickets

- Gala
- Live Auction
- Fund-A-Dream
- Family Festival Days (2 available)

PATRON SPONSORS - \$2,500 each

Sponsor logo to appear on event promotions.

The ticket package includes: 4 Gala and 12 Family Festival Days tickets

- Designer Wreaths
- Mini Trees
- Raffle Tree (2 available)
- Venue
- Catering

SUSTAINER SPONSORS - \$1,500 each

Sponsor logo to appear on event promotions.

The ticket package includes: 3 Gala and 8 Family Festival Days tickets

- Kids' Activities
- Visit with Santa
- Designer Appreciation
- 50/50 Raffle
- Best of Live
- Gingerbread House Contest
- Holiday Bar (2 available)

Event proceeds benefit the Skagit Regional Health Foundation.



PLEASE COMPLETE THE SPONSORSHIP AGREEMENT FORM ON THE REVERSE SIDE



TREES AND GENERAL UNDERWRITING

Each year the trees create an awe-inspiring array of color, light and imagination. Tree sponsors will be recognized in the Live Auction program, on tree signage and the Foundation's annual report in HealthQuest magazine and tree signage. Detailed below are sponsorship ticket packages:

BENEFACTOR

TREE SPONSOR — \$5,000

You are the sole tree sponsor with an option to keep the tree; give your tree to the charity of your choice or place the tree in the Live Auction. Tree and its décor will be funded by sponsorship monies.

Ticket package includes: 6 Gala and 10 Family Festival Days tickets.

PATRON

TREE SPONSOR — \$2,500

You are the sole tree sponsor. Your tree will be in the Live Auction. Tree and its décor will be funded by sponsorship monies.

Ticket package includes: 4 Gala and 12 Family Festival Days tickets.

FRIEND

TREE CO-SPONSOR — \$750

You are a tree co-sponsor. Your tree will be in the Live Auction. Tree and its décor will be funded from sponsorship monies.

Ticket package includes: 2 Gala and 2 Family Festival Days tickets.

SUSTAINER

TREE SPONSOR — \$1,500

You are the sole sponsor. Your tree will be in the Live Auction. Tree and its décor will be funded by sponsorship monies.

Ticket package includes: 3 Gala and 8 Family Festival Days tickets.

GENERAL UNDERWRITING

These sponsorship gifts will help to underwrite general Festival expenses. Ticket packages include:

\$1,500 and up: 3 Gala and 8 Family Festival Days tickets

\$750—\$1,499: 2 Gala and 2 Family Festival Days tickets

\$300—\$749: 10 Family Festival Days tickets



Skagit Regional Health
FOUNDATION

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2025 SPONSORSHIP CONFIRMATION FORM



SPONSORSHIP CATEGORY DESIRED

*Descriptions and benefits on
reverse side*

EVENT SPONSORSHIPS

- \$10,000** TITLE **PEOPLES BANK**
- \$5,000** Gala **HERITAGE BANK**
- \$5,000** Live Auction **WHIDBEY COFFEE**
- \$5,000** Fund-a-Dream
- \$5,000** Family Festival Days **PWT**
- \$2,500** Designer Wreaths
- \$2,500** Mini Trees
- \$2,500** Raffle Tree
- \$2,500** Venue
- \$2,500** Catering
- \$1,500** Gingerbread House Contest
- \$1,500** Kids' Activities
- \$1,500** Visit With Santa
- \$1,500** Designer Appreciation
- \$1,500** 50/50 Raffle
- \$1,500** Best of Live
- \$1,500** Holiday Bar (2 available)

TREE SPONSORSHIPS

- \$5,000** Benefactor Tree
- \$2,500** Patron Tree
- \$1,500** Sustainer Tree
- \$ 750** Friend Tree (Co-Sponsor)

UNDERWRITING

- \$1500 and up**
- \$750 - \$1499**
- \$300 - \$749**

Please return completed form indicating
sponsorship type and payment option.

We appreciate you sending your form in promptly
to insure your sponsorship preference.

Business Name: _____ Phone: _____

Contact Person: _____

Email (required): _____

Address: _____

City: _____ State: _____ Zip: _____

Authorized Signature: _____ Date: _____



PLEASE CHECK THE APPROPRIATE BOX AND MAIL TO:
SKAGIT REGIONAL HEALTH FOUNDATION
PO BOX 1376, MOUNT VERNON, WA 98273



Please email an invoice to facilitate payment.

Enclosed is my check payable to the Skagit Regional Health Foundation.

Please charge my Visa, MasterCard or Discover \$ _____

Card #: _____ Exp. Date: _____ 3-digit Security Code: _____

Questions? Please contact the Foundation Office at
360-814-5747 or Foundation@skagitregionalhealth.org

Thank You!

**SINGLE GALA
TICKETS ARE
\$110**



Skagit  Regional Health
FOUNDATION