

Day of Hope

Delivering hope to our local patients with cancer.

Yes, I want to support local patients with cancer!

Company (if applicable): _____

Primary Contact: _____

Sponsorship name as you would like it to appear on sponsorship materials (if different than above):

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Company Social Media Names (if applicable): _____

Sponsorship Details

LEVELS

- Inspire Sponsorship\$20,000
- Hope Sponsorship \$10,000
- Dignity Sponsorship\$5,000
- Justice Sponsorship \$2,500
- Excellence Sponsorship \$1,500

- No, I will not be a sponsor for Day of Hope 2026; however, I would like to make a donation of \$_____ to support local patients with cancer and their families.*

Deadline to reserve space is **June 17, 2026**.

Please submit all logos in PDF, JPEG, or EPS format.

For questions, call 805.994.5419 or e-mail candace.brown@commonspirit.org

EVENT PARTNERS

SANTA MARIA  TIMES



Dignity Health®
A member of CommonSpirit

Payment

Total: \$ _____

To give by credit card, you can do so safely using our online portal.

Scan this QR code or visit www.supportarroyogrande.org/dayofhope/sponsor

To pay by check, please make your check payable to Arroyo Grande Community Hospital Foundation and include it with this complete sponsor form and mail to: **345 South Halcyon Road, Arroyo Grande, CA 93420**

