



**CHINESE  
HOSPITAL**



# 127th Anniversary Celebration

Thursday, April 23, 2026, 6PM | H.L. Peninsula Restaurant SSF  
RSVP by April 10, 2026

<b>GALA SPONSORSHIPS</b>	<b>PRESENTING SPONSOR \$50,000</b>	<b>COMMUNITY BUILDER \$20,000</b>	<b>COMMUNITY ADVOCATE \$10,000</b>	<b>COMMUNITY PARTNER \$5,000</b>	<b>COMMUNITY SUPPORTER \$500</b>
Event tickets/seats	30 VIP	20 VIP	10 VIP	10	1
Recognition in the annual report	Name	Name	Name	Name	Name
Recognition on the event webpage	Logo	Logo	Logo	Logo	
Recognition in the printed program <i>(Artwork must be submitted by 3/31/2026)</i>	Logo	Logo	Logo	Logo	
Limited edition Chinese Hospital mug set	10	6	2	2	
Color ad in the printed program <i>(Artwork must be submitted by 3/31/2026)</i>	2 Full page	1 Half page	1 Half page		
Recognition on printed signage	Logo	Logo	Logo		
Recognition in a social media post	●	●	●		
Verbal recognition during the program	●	●			
Name inclusion in gala press release	●				
Speaking opportunity during program	●				

## SUPPORTING SPONSORSHIPS

### RAFFLE PARTNER **\$10,000**

*Must pledge by 3/15/2026*

- 5 event tickets
- Logo recognition on raffle webpage and raffle promotional materials
- Recognition in the annual report, and event program
- Verbal recognition during the raffle drawing at the event

### CENTERPIECE PARTNER **\$7,500**

*1 opportunity available  
Must pledge by 3/31/2026*

- 5 event tickets
- Logo on centerpieces at each table
- Recognition in the annual report, and event program

### WINE PARTNER **\$7,500**

*1 opportunity available  
Must pledge by 3/31/2026*

- 5 event tickets
- Logo on wine bottles at each table
- Recognition in the annual report, and event program

For more information, please call 1-415-677-2470 or email [donate@chasf.org](mailto:donate@chasf.org).

Chinese Hospital is a 501(c)(3) non-profit organization with Tax ID 94-0382780.



SCAN TO  
REGISTER  
ONLINE



# 127th Anniversary Celebration

## 2026 COMMITMENT FORM Yes! I/We will contribute at the following level(s):

### Gala Sponsor:

- Presenting Sponsor \$50,000
- Community Builder \$20,000
- Community Advocate \$10,000
- Community Partner \$5,000
- Community Supporter \$500

### Supporting Sponsor:

- Raffle \$10,000
- Centerpiece \$7,500
- Wine \$7,500
- Donation (Fund the mission)**  
Amount: \$ \_\_\_\_\_



SCAN TO REGISTER ONLINE

## SPONSOR INFO

Sponsor Name (as it should be published) \_\_\_\_\_ Email \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## PAYMENT INFO

- Check:** Check payable to "Chinese Hospital" enclosed for \$ \_\_\_\_\_
- Credit card:** I will pay online at [www.chinesehospital-sf.org/donation](http://www.chinesehospital-sf.org/donation)

## ATTENDEE INFO

- I/We will not attend but please accept my charitable contribution.
- I/We will attend. Guest information is below and/or will be provided later.

	First and Last Name	Email
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

To provide additional guest information and return this form, please email [donate@chasf.org](mailto:donate@chasf.org) or mail it to 845 Jackson St, San Francisco, CA 94133, Attn: Chinese Hospital Fund Development.

For questions, please contact 1-415-677-2470 or [donate@chasf.org](mailto:donate@chasf.org).



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# 東華醫院 127 週年慶典

2026年4月23日（星期四） | 晚上六時  
南三藩市半島豪苑酒家  
請於 2026年4月10日前回覆

晚宴贊助	冠名贊助 \$50,000	社區建設者 \$20,000	社區倡議者 \$10,000	社區夥伴 \$5,000	社區支持者 \$500
門票/座位	30 貴賓座	20 貴賓座	10 貴賓座	10	1
年刊鳴謝	列名	列名	列名	列名	列名
活動網頁鳴謝	商標	商標	商標	商標	
場刊鳴謝 (圖稿需於 3/31 前提交)	商標	商標	商標	商標	
東華醫院限量版馬克杯組	10	6	2	2	
場刊彩色廣告 (圖稿需於 3/31 前提交)	2 頁全版	1 頁半版	1 頁半版		
現場宣傳品鳴謝	商標	商標	商標		
社交媒體貼文鳴謝	●	●	●		
晚宴台上鳴謝	●	●			
晚宴新聞稿鳴謝	●				
晚宴中發言機會	●				

## 其他贊助

### 抽獎贊助夥伴 \$10,000

須於3月15日前報名

- 5 張晚宴門票
- 抽獎活動網頁及抽獎宣傳品刊登機構商標
- 年報及場刊鳴謝
- 晚宴抽獎活動中鳴謝

### 桌飾贊助夥伴 \$7,500

名額1個，須於3月31日前報名。

- 5 張晚宴門票
- 桌飾上展示機構商標
- 年報及場刊鳴謝

### 酒品贊助夥伴 \$7,500

名額1個，須於3月31日前報名。

- 5 張晚宴門票
- 酒瓶上展示機構商標
- 年報及場刊鳴謝

如需更多資訊，請致電 1-415-677-2470 或發送電郵至 [donate@chasf.org](mailto:donate@chasf.org)。

東華醫院是501(c)(3) 非牟利機構，稅務號碼為94-0382780。



掃碼報名



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# 東華醫院 127 週年慶典

**2026 年贊助表** 我/我們願意以下列方式支持：

**晚宴贊助：**

- 冠名贊助 \$50,000
- 社區建設者 \$20,000
- 社區倡議者 \$10,000
- 社區夥伴 \$5,000
- 社區支持者 \$500

**其他贊助：**

- 抽獎贊助 \$10,000
  - 桌飾贊助 \$7,500
  - 酒品贊助 \$7,500
  - 捐款（支持使命）
- 金額：\$ \_\_\_\_\_



掃碼報名

**贊助機構／贊助人資料**

贊助機構／贊助人名稱（刊登用） \_\_\_\_\_ 電郵 \_\_\_\_\_

聯絡人姓名 \_\_\_\_\_ 電話 \_\_\_\_\_

地址 \_\_\_\_\_ 城市 \_\_\_\_\_ 州 \_\_\_\_\_ 郵區號碼 \_\_\_\_\_

**付款資料**

- 支票：抬頭請寫「Chinese Hospital」，金額 \$ \_\_\_\_\_。
- 信用卡：我會到 [www.chinesehospital-sf.org/donation](http://www.chinesehospital-sf.org/donation) 支付。

**參加者資料**

- 我/我們將不出席晚宴，請接受捐款。
- 我/我們將出席晚宴。參加者資料如下，或稍後提供。

	參加者姓名	電郵
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

如需提供更多參加者資料或交回表格，請電郵至 [donate@chasf.org](mailto:donate@chasf.org) 或  
郵寄至 845 Jackson St, San Francisco, CA 94133, Attn: Chinese Hospital Fund Development。

如有疑問，請致電 1-415-677-2470 或發送電郵至 [donate@chasf.org](mailto:donate@chasf.org)。