



# OKTOBERNEST

celebrating our signature fundraiser at home

Partner with us for a month of community awareness and support for senior services in the Big Bend, culminating in a Day of Giving campaign to fund vital programs and celebrate the power of the collective voice.

What a year it has been! As we head into the fall, our team would usually be gearing up for an exciting evening out for Oktoberfest. That evening of celebration would fund programs that allow seniors to age in place all year long. This year, as we all work to adapt programs and maintain safe protocols, Elder Care Services has decided to forgo our usual in-person event. The safety of the seniors we serve, our staff, and our community is our main priority. We will miss the party but the work will not stop!

Since the outbreak of the pandemic, Elder Care has not compromised on our mission to improve the quality of life of seniors through services that reduce social isolation and allow them to age with dignity in their homes. There is a tremendous need in our community and that has been significantly increased with the vulnerability of seniors to COVID-19. Thanks to the support of generous community members and grant funding we have increased services to meet the need, but there is still work to be done.

We want to invite you to partner with us in serving seniors. With your support, homebound seniors will receive nutrition delivered right to their doors, socially isolated seniors will be connected and supported, frail seniors will be provided with care that keeps them safe at home, and seniors facing crisis situations will have a place to reach out for emergency help. We may not be able to gather in person this year but we can still stand up together virtually to show the community our values and strengths. As you finalize your community investment plans for this year, I would like to ask for your support as an OktoberNest sponsor. With your help we can continue our expanded services and keep seniors in a safe and secure environment.

With warm regards,



Jocelyne M. Fliger, MSW  
President & CEO

## **Elder Care Services has been active in response to seniors' needs during COVID-19. Since March 2020 we have:**

- **Served over 66,500 prepared meals (an increase of 16,000 from this time period last year!)**
- **Made over 7,000 telephone calls to socially isolated seniors**
- **Provided over 11,000 hours of care to seniors in their homes**
- **Distributed over 930 bags of food**
- **Supplied over 450 other material aid items like toilet paper and cleaning supplies to seniors sheltering at home**



# EVENT SPONSORSHIPS

PRESENTING \$7,500	PLATINUM \$5,000	GOLD \$2,500	SILVER \$1,000	BRONZE \$500
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## RECOGNITION ON ELDER CARE SERVICES SITES

Logo on OktoberNest webpage					
Recognition through personalized social media post					
Personalized boosted social media posts	4	3	2	2	
Recognition on multiple peer-to-peer fundraising sites					
Recognition on Elder Care Services homepage					

## RECOGNITION IN COMMUNITY SOURCES

Logo on community billboard					
Recognition in radio placement					
Recognition in fundraising campaign mailer					

## POST-EVENT RECOGNITION

Logo in e-newsletter to over 2,000 individuals					
Recognition in Annual Report					

# 2020 OKTOBERNEST SPONSORSHIP COMMITMENT FORM

For your convenience, sponsorships can now be submitted online at  
**eldercarebigbend.org/oktobernest**

Organization Name: \_\_\_\_\_

Contact Person/  
Individual Donor: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

## Sponsorship levels

Presenting (\$7,500)

Platinum (\$5,000)

Gold (\$2,500)

Silver (\$1,000)

Bronze (\$500)

## Payment Authorization information

Payment enclosed (Please make checks payable to Elder Care Services)

Please invoice or contact me to arrange payment

I authorize Elder Care Services to charge my credit card in the amount of \$ \_\_\_\_\_

Credit Card:      Visa \_\_\_\_\_      Mastercard \_\_\_\_\_      American Express \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. date: \_\_\_\_\_ V-Code: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_