



 **ELDER CARE**
SERVICES, INC.

850.921.5554 • 2518 W. Tennessee St., Tallahassee, FL • www.eldercarebigbend.org



@ElderCareTally



@ECSforSeniors



@ElderCareServicesInc



The Elder Care Services team is gearing up for our 23rd Oktoberfest celebration to support senior services in our area. We are excited to bring back this annual tradition! 2020 was a year of struggles and heartbreak for many, and it highlighted the importance of home-based care and the devastating effects isolation can have on mental and physical health. This year we are hosting a hybrid event. On October 10th, we will join together for an afternoon of drinks, food, and entertainment outside in the park. We will also have a pickup option for the drinks and food for those more comfortable in a small group environment. However you choose to celebrate with us, you are funding critical programs that allow seniors to age in place.

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 significantly increased given the vulnerability of seniors to COVID-19. Thanks to the support of generous community members and grant funding, we increased services in 2020 to meet the need, but there is still work to be done.

We 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. As you finalize your community investment plans for this year, I would like to ask for your support as an Oktoberfest sponsor. With your help we can continue our expanded services and keep seniors in a safe and secure environment.

With warm regards,

A handwritten signature in black ink that reads "Jocelyne M. Fliger".

Jocelyne M. Fliger, MSW
President & CEO

Elder Care Services has been committed to fostering the well-being of seniors for over 50 years. In 2020, we were able to:

- Serve 147,977 meals to seniors in Leon County
- Conduct over 14,000 wellness calls and check-ins for socially isolated seniors
- Supply 26,879 hours of care to seniors in their homes
- Distribute over 1,600 bags of food from our food pantry
- Support over 170 frail seniors with individualized aid in their homes



EVENT SPONSORSHIPS

Presenting Sponsor \$10,000	Platinum Sponsor \$5,000	Gold Sponsor \$2,500	Silver Sponsor \$1,000	Bronze Sponsor \$500
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RECOGNITION ON ELDER CARE SERVICES SITE

Logo on Elder Care Services home page					
Recognition in Annual Report					
Logo on the Oktoberfest page on website					

EVENT RECOGNITION

Logo on souvenir stein					
Logo stickers on food boxes					
Logo on billboard in a centrally trafficked area					
Logo placement on to-go tasting notes cards					
Sponsor level logo material in VIP food and drink area					
Event tickets	10 Tickets	8 Tickets	6 Tickets	4 Tickets	2 Tickets
Sponsor level signage in central event locations					

2021 Oktoberfest Sponsorship Commitment Form

For your convenience, sponsorships can be submitted online at

eldercarebigbend.org/oktoberfest

Organization Name: _____

Contact Person/
Individual Donor: _____

Address: _____

City/State/Zip Code: _____

Phone Number: _____ Email: _____

Number of attendees you expect to attend the event in person: _____

We are only requesting an estimate. You may change this number prior to the event.

Sponsorship levels

___ Presenting (\$10,000)

___ Platinum (\$5,000)

___ Ticket Sponsor (\$1,000)

___ Gold (\$2,500)

(10 tickets and logo/name recognition on
entrance board)

___ 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: _____