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# OKTOBERFEST 2024



**OCTOBER 20, 2024**

**3PM-7PM**

DOORS OPEN AT 2PM FOR VIP



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850 921 5554 ● 2518 W. Tennessee St., Tallahassee, FL ● [www.eldercarebigbend.org](http://www.eldercarebigbend.org)



# OKTOBERFEST

## ELDER CARE SERVICES, INC. 2024



**JOIN US AT THE 26TH ANNUAL OKTOBERFEST!**

As a long-standing community tradition, Elder Care Services' Oktoberfest features great German Cuisine, beer and drink samples from the best craft businesses in the area, music, and games. It's the perfect way to celebrate the season while making a difference in the lives of our senior friends and neighbors.

As our premier fundraiser, sponsorships are a crucial part of providing vital nutrition to homebound seniors, social connections to lonely seniors, personalized care for frail seniors, and emergency assistance for seniors facing crisis situations. Community partners play a significant role in ensuring that seniors in our area can age at home with comfort and dignity.

**As an Oktoberfest sponsor, you not only make a meaningful impact on our senior community, you also gain valuable exposure for your business.** Every year the event brings together over 600 community members and reaches thousands of others through our sponsor billboards and media promotions.

This packet includes a list of benefits for all sponsorship levels and a sponsor commitment form. You may return this form by email, mail, or through making a payment on the Oktoberfest page of our website.

**WE LOOK FORWARD TO MAKING THIS OKTOBERFEST THE BEST ONE YET AND RAISING CRITICAL FUNDING FOR SENIORS!**

### 2023 IMPACT

**3,188**

items of material aid distributed to seniors

**2,154**

local seniors received services

**113,321**

meals distributed to seniors in need

**43**

seniors received care at Elder Day Stay

**208**

seniors received care in their homes

**66,014**

hours of personalized in-home care provided





# Sponsor Commitment Form

For your convenience, sponsorships can be submitted online at [eldercarebigbend.org/oktoberfest](http://eldercarebigbend.org/oktoberfest) or emailed to Nicole Ballas at [ballasn@ecsbigbend.org](mailto:ballasn@ecsbigbend.org)

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

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

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

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

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

Number of people in your organization you expect to attend the event: \_\_\_\_\_

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

## Sponsorship levels

\_\_\_ Presenting (\$10,000)

\_\_\_ Diamond (\$7,500)

\_\_\_ Platinum (\$5,000)

\_\_\_ Gold (\$2,500)

\_\_\_ Silver (\$1,000)

\_\_\_ Bronze (\$500)

\_\_\_ VIP Ticket Sponsor (\$1,000)

(10 VIP tickets with Plaza access and logo/name recognition on entrance board)

\_\_\_ Ticket Sponsor (\$600)

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

## 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: \_\_\_\_\_