

| <b>SPONSORSHIP BENEFITS GRID</b>   | <b>\$50,000</b><br>Presenting (exclusive) | <b>\$25,000</b><br>Platinum Star | <b>\$10,000</b><br>Gold Star | <b>\$5,000</b><br>Silver Star | <b>Participant</b><br>Bronze Star |
|--|---|----------------------------------|------------------------------|-------------------------------|-----------------------------------|
| Exclusive branding as presenting sponsor                                   | ●   |                                  |                              |                               |                                   |
| Marquee placement on childrensMN.org homepage                              | ●   | ●                                |                              |                               |                                   |
| Mentioned in pre-event news alert  | ●   | ●                                | ●                            |                               |                                   |
| Included in print ad   | ●   | ●                                | ●                            | ●                             |                                   |
| Invitation to Children's Minnesota Foundation donor stewardship event      | ●   | ●                                | ●                            | ●                             |                                   |
| Logo featured in event emails  | ●   | ●                                | ●                            | ●                             | ●                                 |
| Social media post/repost during event                                      | ●   | ●                                | ●                            | ●                             | ●                                 |
| Highlighted in event impact report   | ●   | ●                                | ●                            | ●                             | ●                                 |
| Logo, link, and information shared on event website                        | ●   | ●                                | ●                            | ●                             | ●                                 |
| Tour of Children's Minnesota with check presentation and photo opportunity | ●   | ●                                | ●                            | ●                             | ●                                 |
| Support from the Children's Minnesota Foundation throughout the event      | ●   | ●                                | ●                            | ●                             | ●                                 |
| Provided fundraising toolkit with helpful event materials                  | ●   | ●                                | ●                            | ●                             | ●                                 |

## 2022 CAMPAIGN IMPRESSIONS

### PAID MEDIA

5.5 million impressions

### DIRECT EMAIL

106,973 impressions  
34.33% open rate

### EARNED MEDIA

225 stories picked up  
118 million impressions

### CAMPAIGN WEBSITE

16,503 page views

THANK YOU FOR YOUR SUPPORT.

# SHINE BRIGHT FOR KIDS CAMPAIGN PROPOSAL FORM



Thank you for your interest in supporting Children’s Minnesota. Before you hold or publicize your campaign, you must submit this application to Children’s Minnesota Foundation for approval. Please email the completed application to Children’s Minnesota Foundation at [giving@childrensMN.org](mailto:giving@childrensMN.org). Please allow two weeks for approval.

## CAMPAIGN

Main contact \_\_\_\_\_

Corporation \_\_\_\_\_

Mailing address \_\_\_\_\_

Email address \_\_\_\_\_

Phone \_\_\_\_\_

Sponsorship level:  Presenting  Platinum Star  Gold Star  Silver Star  Bronze Star

## CAMPAIGN INFORMATION

Type of campaign:  Point of sale  Portion of purchase  Proud Supporter ‘pin-ups’  Product-specific  
 Employee giving campaign  Matching Gift  In-kind donation  Other \_\_\_\_\_

Name of campaign \_\_\_\_\_

Description of campaign \_\_\_\_\_

Location \_\_\_\_\_

Date(s) of campaign \_\_\_\_\_

Estimated participation \_\_\_\_\_

Estimated value of proceeds \_\_\_\_\_

## USE OF FUNDS

Proceeds from the Shine Bright for Kids campaign will support the **Cancer and Blood Disorders Program** at Children’s Minnesota.

Until Children’s Minnesota Foundation has granted written permission, contributions may not be solicited in the name of Children’s Minnesota, and the name “Children’s Minnesota” may not be used for any purpose. Information provided on this form is correct and accurately describes the proposed campaign. The campaign will be bound by the terms of the proposal submitted to Children’s Minnesota Foundation. The undersigned agrees to all guidelines outlined in Children’s Minnesota community fundraiser resource kit.

I agree to the following:

THE ORGANIZATION/COMPANY SPONSORING THE CAMPAIGN ASSUMES ALL RISKS AND LIABILITIES ASSOCIATED WITH THE CAMPAIGN AND HEREBY RELEASES AND HOLDS HARMLESS CHILDREN’S MINNESOTA AND CHILDREN’S HEALTH CARE FOUNDATION AND THEIR DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, AND SUCCESSORS, AND ASSIGNS FROM AND AGAINST ANY AND ALL CLAIMS, DAMAGES, LIABILITIES, COSTS AND EXPENSES, INCLUDING REASONABLE ATTORNEY’S FEES ARISING OUT OF OR INCLUDING, WITHOUT LIMITATION, ANY PERSONAL INJURIES OR DAMAGE TO PROPERTY WHICH MAY OCCUR IN CONJUNCTION WITH THE CAMPAIGN. CHILDREN’S MINNESOTA PARTICIPATION AS A BENEFICIARY IN NO WAY IMPLIES A BUSINESS AGREEMENT WITH ANY SPONSORS OR COMMITTEE MEMBERS.

I agree on behalf of the organization/group that I represent that Children’s Minnesota will receive all revenues from the campaign within 30 days of the event or within alternative terms mutually agreed upon. Ongoing campaigns must provide revenue to Children’s Minnesota once every quarter. I agree that all printed materials and publicity for the event must be approved by Children’s Minnesota prior to being released, printed, etc. and that I will abide by the policies and guidelines provided to my organization/group by Children’s Minnesota.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Must be 18 years or older to sign. Please note: we treat your digital signature like a wet signature; type your full name.*

**Please submit this form at least four weeks prior to the proposed first day of the campaign.**

Completion of this form does not ensure approval. You will be contacted if further information is needed. If you have any questions regarding this form or your campaign, please contact Children’s Minnesota Foundation at 952-992-5500 or [giving@childrensMN.org](mailto:giving@childrensMN.org).