

Friends of



DANA-FARBER
CANCER INSTITUTE

FRIENDS CURE CABIN FEVER

AN EVENT TO BENEFIT
RESEARCH & PATIENT CARE PROGRAMS
AT THE DANA-FARBER CANCER INSTITUTE

February 27, 2019 | 6:30 to 9:30 p.m.
Capo, South Boston

Audience: Approximately 150 guests

Tickets: \$150 each (young professional pricing available)

More Information:

danafarber.org/friends | friends@dfci.harvard.edu | 617-632-3909



Friends funding is unique. Each year in September, the Friends donate every dollar we have raised in the past year to the Institute. Since our founding in 1976, we have gifted more than \$34 million to projects that might not otherwise receive funding, supporting young researchers on the verge of new discoveries, patient care programs, and critical research equipment at the Institute. Philanthropy in the present makes future breakthroughs, cutting-edge treatments, and improved quality of care at Dana-Farber possible, and we hope you will join us in February to celebrate friendship and philanthropy.

FRIENDS CURE CABIN FEVER | 2019 SPONSOR BENEFITS

February 27, 2019 | 6:30 to 9:30 p.m. | Capo, South Boston

Cure Cabin Fever with us! Enjoy delicious food, specialty cocktails, music, dancing, games, and fun with all your Friends!

\$5,000

- 20 event tickets
- On-site event signage – name or logo featured on the “step & repeat” photo background
- Verbal recognition during event
- Featured in social media, website, and invitation

\$2,500

- 8 event tickets
- Verbal recognition during event
- Featured in social media, website, and invitation

OPPORTUNITY DRAWING: IN-KIND ITEM \$2,500+ 3 OPPORTUNITIES

- 6 event tickets
- Logo placement in photo area
- Featured in social media, website, and invitation

\$1,000

- 4 event tickets
- Sponsor signage at event

\$500

- 2 event tickets
- Sponsor signage at event

I am delighted to support **Friends Cure Cabin Fever!**

I would like to make a gift at the _____ Sponsorship Level.

I cannot attend, but would like to make a donation of \$: _____

Name: _____ Preferred Listing: _____

Address: _____ City, State Zip: _____

Preferred Phone: _____ Email: _____

Guest Names: _____

Method of Payment

Check Enclosed

Please charge my credit card

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Signature: _____

*Remit completed form and payment:
Friends of Dana-Farber Cancer Institute
450 Brookline Avenue, SW 120, Boston, Massachusetts 02215
All contributions over \$100 per event ticket are tax-deductible.*