A NIGHT HONORING HEALERS



November 18, 2025

Arthur R. Outlaw Mobile Convention Center

Sponsorship Levels and Registration

Presenting Sponsor\$75,000
Hope Sponsor\$45,000
Love Sponsor\$25,000
Compassion Sponsor\$15,000

Grace Sponsor	\$10,000
Healing Sponsor	\$5,000
Devotion Sponsor	\$3,000
Inspire Sponsor	\$1,000

Event Admission

Individual Ticket \$175

Registration

- · Sponsorship registrations can be completed online at usahealthsystem.com/healers
- Registrations can be secured through the attached registration form

Payment

- · Make an online credit card payment by visiting usahealthsystem.com/healers
- · Check made payable to USA Health
- If registering with a paper form, please mail form with payment to: USA Office of Development A Night Honoring Healers
 650 Clinic Drive TRP III Suite 1500 Mobile, AL 36688

*Sponsorship benefits and event details are subject to change. Tax deductible amounts will be notated on your receipt.

> For questions, contact the Office of USA Health Development 251-460-7032 or development@southalabama.edu

Sponsorship Levels

Presenting Sponsor \$75,000

- Recognition as the presenting sponsor for a night honoring healers on USA Health's promotions, event materials, registration website, press releases and on all earned media appearances
- Twenty tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 10 vehicles
- · Presenting sponsor recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

Hope Sponsor \$45,000

- Recognition as the exclusive cocktail reception sponsor
- Sixteen tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 8 vehicles
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

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Sponsorship Levels

Love Sponsor \$25,000

- Recognition as the exclusive Love Sponsor
- · Sixteen tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 8 vehicles
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

Compassion Sponsor \$15,000 (2 available)

- Recognition as the exclusive Compassion Sponsor in one of the main event videos featured during the A Night Honoring Healers presentation
- Ten tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 6 vehicles
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

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Sponsorship Levels

Grace Sponsor \$10,000

- · Eight tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 4 vehicles
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

Healing Sponsor \$5,000

- · Eight tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- Reserved parking for 4 vehicles
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

Devotion Sponsor \$3,000

- · Four tickets to A Night Honoring Healers
- Priority seating at A Night Honoring Healers
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

Inspire Sponsor \$1,000

- Two tickets to A Night Honoring Healers
- · Priority seating at A Night Honoring Healers
- · Category recognition in A Night Honoring Healers program
- Name/logo recognition on event registration website

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Sponsor name:		
As you would like it to appear		
Contact name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
Sponsorship levels:		
O Presenting Sponsor \$75,000	○ Compassion Sponsor\$15,000	O Devotion Sponsor\$3,000
O Hope Sponsor\$45,000	O Grace Sponsor\$10,000	O Inspire Sponsor\$1,000
O Love Sponsor\$25,000	O Healing Sponsor\$5,000	O Individual Ticket\$175
		Qty
Payment		
Make an online payment by visiting	USAHealthSystem.com/healers	
Credit card \bigcirc MasterCard \bigcirc Ma	sterCard \bigcirc Discover \bigcirc AmEx	
CC#	Exp	: CVV Code:
Name as it appears on credit card:_		

Mail form with payment to: USA Office of Development Attn: A Night Honoring Healers 650 Clinic Drive, TRP III Suite 1500 Mobile, AL 36688

Questions? Contact Shanna Thorpe 251-460-7491 or sthorpe@southalabama.edu