

COLUMBIA UNIVERSITY IRVING
MEDICAL CENTER



HOPE & HEROES WALK

SEPTEMBER 26, 2021

SPONSORSHIP OPPORTUNITIES

HOPEANDHEROESWALK.ORG



What We Fund

The Hope & Heroes Walk began in 2011 to give our community a way to gather and commemorate their experiences. Over the last ten years, more than **9,000** people have raised over **\$2.8 million dollars** to support pediatric cancer and blood disorders.

Funds raised at the Walk support:



State of the Art Clinical Care

Columbia is home to the largest and most comprehensive program for pediatric cancer and blood disorders in the New York tri-state area and treats over 1,500 patients a year.



Pioneering Research

Our researchers are world leaders studying all aspects of pediatric cancer and blood disorders. Our laboratory research includes: Brain & Nervous System Tumors, Solid Tumors, and Leukemia/Lymphoma. Our Developmental Therapeutics Program and our Precision in Pediatrics Program are changing how we treat patients in our clinic.



Comprehensive Treatment

Our Center for Comprehensive Wellness gives patients access to services like psychosocial support, educational assistance, integrative therapies, and survivor wellness... FREE of charge.



Care for Patients In Need

Columbia University Irving Medical Center is a public hospital, treating every patient regardless of their insurance status or pay ability. Hope & Heroes ensures that every child receives the highest quality of care and that funds are set aside for difficult times.



5Tower Walk

5Tower is the floor for pediatric cancer & blood disorder patients in the hospital. In 2017, we introduced the 5Tower Walk for patients, families, nurses, doctors, and other staff of 5Tower, where they watch a live stream of the Walk Opening Ceremony and complete their own walk route in the hospital.

How Your Support Helps

- Ensuring that patients receive the **best care** in the **tri-state area**.
- Providing funding for Developmental Therapeutics or Phase 1 Trials. Columbia is **one of 21 hospitals and the only in the tri-state area** able to offer these new treatments to pediatric patients.
- Offering **psychosocial support** for patients and families throughout treatment and beyond.
- Supporting **world-class research** in areas including cancer genetics, solid tumors, leukemia/lymphoma, and brain tumors.
- Providing healthcare & support for survivors for the **rest of their lives**.

YOUR SPONSORSHIP CAN ALSO SUPPORT A WALK TEAM

Walk Sponsors can designate their sponsorship donation to be credited towards a Walk Team's fundraising total!



Meet the Bhalla Family

"I know how hard – physically, emotionally, and financially – having a child with cancer can be. I also know what blessing it is to have a beautiful, smart, and healthy child thanks to the care and support we received at Columbia University Irving Medical Center."



Hope & Heroes
Columbia University Irving Medical Center

SPONSOR LEVELS

SPONSOR LEVELS & BENEFITS	HERO IN ACTION: \$5,000	SUPPORTING SPONSOR: \$1,000	RALLYING SPONSOR: \$500
PRE-EVENT BENEFITS			
Press Release to Announce Partnership	✓		
Social Media Feature	✓	✓	
Logo/Name on Walk Website	✓	✓	✓
EVENT DAY BENEFITS			
Logo/Name on Story Highlight (Signage & Video)	✓		
Exclusive Opportunity for Inclusion in Team Boxes	✓		
Logo/Name on Walk Banner		✓	
Recognition During Ceremony	✓	✓	✓
Logo/Name on Walk Participant T-Shirt*	✓	✓	✓

*Logos for t-shirt must be provided by July 31, 2021, to allow for timely design, printing, and distribution.



SPONSORSHIP COMMITMENT FORM

We are proud to support the work at Columbia University Irving Medical Center through a Hope & Heroes Walk Sponsorship:

- Hero in Action Sponsor (\$5,000)
- Supporting Sponsor (\$1,000)
- Rallying Sponsor (\$500)

SPONSOR/CONTACT INFORMATION

Company Name: _____

List name as you would like it to appear on event materials.

Contact Name: _____

Email Address: _____

Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

PAYMENT OPTIONS

Check (payable to Hope & Heroes) enclosed

Credit Card (Please charge my:)

___ AmEx ___ Visa ___ MasterCard

Name on Credit Card: _____

Card Number: _____

Expiration Date: ___ / ___ CVV: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Please credit my sponsorship towards a Team or Walker: _____

RETURN THIS FORM AND A HI-RESOLUTION VERSION OF YOUR LOGO TO KYLER HALE

EMAIL: KYLER@HOPEANDHEROES.ORG

MAIL: HOPE & HEROES, 161 FORT WASHINGTON AVENUE, IP-7, NEW YORK, NY 10032

Contributions are tax-deductible to the full extent of the law