



North County Unit
Rady Children's Hospital Auxiliary

WINTER WONDERLAND 2026

SPONSORSHIP FORM

Name: _____ Phone Number: _____

Email: _____

Title: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

YES! I would like to support **Winter Wonderland 2026** benefitting the **Rady Children's Hospital Heart Transplant Center** at the following level:

- ☐ **Platinum Heart Sponsor: \$5,000**
 - Recognition in Event Program and signage at the event
 - Thank you on social media, name or logo on our website with website link
 - 4 tickets to Winter Wonderland, VIP Parking, Bottle of Wine, Gift Bag
- ☐ **Diamond Heart Sponsor \$2,500**
 - Recognition in Event Program and at the event
 - Thank you on social media, name or logo on our website with website link
 - 2 Tickets to Winter Wonderland, Bottle of Wine, Gift Bag
- ☐ **Gold Heart Sponsor: \$1,000**
 - Recognition in Event Program and at the event
 - Thank you on social media, name or logo on our website with website link
- ☐ **Silver Heart Sponsor: \$500**
 - Recognition in Event Program and at the event
 - Name or Logo on our website with website link
- ☐ **Loving Heart Sponsor: \$250**
 - Recognition in Event Program
 - Name or logo on our website

*"We're here for the kids:
advancing hope, health,
and healing."*



Payment Information (Please Select):

- ☐ Enclosed is my check made payable to **RCHA – North County Unit** with memo "Winter Wonderland 2026 Sponsorship" Please return this form and payment to: Judy Ricci, 26861 Banbury Drive, Valley Center, CA 92082
- ☐ I will pay by Credit Card. Donate online at www.rchanorthcounty.org
- ☐ My company has a Matching Gift Program: _____

For questions, please email: rchanorthcountyunit@gmail.com or call (858) 442-7404

Rady Children's Hospital Auxiliary is a tax exempt 501(c)3 organization.
Tax ID Number 33-0170626