



CLARION HOSPITAL  
FOUNDATION



## HANDBAGS *for* HEALTH

AMERICAN LEGION

530 Main Street • Clarion, PA 16214

**Saturday, February 24, 2024 • 2 p.m. - 5 p.m.**



Clarion Hospital EMS averages 7,300 requests for ambulance and other transport services each year and has a coverage area of approximately 750 square miles. The Clarion Hospital Foundation Ambulance Fund will support the critical need for a new ambulance for our hospital and community.

*\$35 per ticket*

Tickets go on sale  
Tuesday, January 8.

Includes 10 bingo games.

Dobbers available for \$1.

Bingo winners receive a designer handbag!

**Heavy hors d'oeuvres. Cash bar available.**

**Tickets for side raffles will be available for purchase at the event. Cash/Check sales only.**

**Tickets are available at the following Clarion locations:**

Clarion County YMCA: 499 Mayfield Rd.

Clarion Area Chamber of Business & Industry: 650 Main St.

Clarion Hospital - Registration/Front Lobby: 1 Hospital Dr.

**For more information, call 814-226-1258  
or visit [BHS-Foundation.org/Clarion Events](https://BHS-Foundation.org/Clarion%20Events)**

**SPONSORSHIP OPPORTUNITIES**

Organization *(as you would like it to appear in print)* \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_



**HANDBAGS for HEALTH**

**Saturday**  
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**2 p.m. - 5 p.m.**

**SPONSOR LEVEL - CHECK ALL THAT APPLY**

- \$1,500 PREMIER SPONSOR – 1 AVAILABLE**  
Logo displayed in premier location on website, logo displayed on signage at event, social media recognition, 8 tickets to participate in event.
- \$1,000 BINGO SPONSOR – 1 AVAILABLE**  
Name listing on web site, name displayed on signage at event, 6 tickets to participate in event.
- \$500 HANDBAG SPONSOR – SEVERAL AVAILABLE**  
Name listing on web site, name displayed on signage at event, 4 tickets to participate in event.
- \$250 PRIZE RAFFLE SPONSOR – SEVERAL AVAILABLE**  
Name listing on web site, name displayed on signage at event, 2 tickets to participate in event.
- I WILL DONATE A GIFT CARD, BASKET, OR GIFT VALUED AT \$100**



Proceeds support the  
**Clarion Hospital  
Foundation  
Ambulance Fund**



**PAYMENT - CHECK APPROPRIATE FORM**

- Check enclosed (made payable to Clarion Hospital Foundation)
- Credit card  Visa  Mastercard  American Express  Discover

Account Number \_\_\_\_\_

Expiration \_\_\_\_\_ Security Code \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_

**SPONSORSHIP DEADLINE:**

**FEBRUARY 1, 2024.**

In order to receive full benefit of name listing on web site and marketing materials, please submit your form ASAP.

**FOR MORE INFORMATION VISIT:**

BHS-Foundation.org/Clarion  
or call 814-226-1258