



# Saturday, October 18, 2025

## Solomons Island

Registration at 7 a.m. | Race Begins at 8:30 a.m.

## SPONSORSHIP OPPORTUNITIES

*All proceeds benefit the Sheldon E. Goldberg Center for Breast Care at CalvertHealth.*

### Did You Know?

Calvert County has a **higher** rate of breast cancer incidence than the state and national average.

# 13%

of women in the U.S. will develop breast cancer at some time during their lives.\*

\*American Cancer Society

### Breast Cancer Mortality Rates

# 22.6

deaths/ 100,000 females

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**Compared to:**

MD Counties 20	U.S. Counties 19.3

#### TITLE SPONSOR — \$15,000

- Signature T-shirt for sponsor registrants/participants
- Company name on front of all shirts; signature and standard (Deadline: Sept 20)
- Company logo on start/finish line
- Facebook Live on the day of the event
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Fifty (50) race registrations
- Logo on website

#### CORPORATE SPONSOR — \$10,000

- Company logo on back of all shirts (Deadline: Sept. 20)
- Facebook Live on the day of the event
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Thirty (30) race registrations
- Logo on website

#### PINK DIAMOND SPONSOR — \$5,000

- Facebook Live on the day of the event
- Company logo on back of participant shirt (Deadline: Sept. 20)
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Twenty (20) race registrations
- Logo on website

#### PLATINUM SPONSOR — \$3,000

- Company logo on back of participant shirt (Deadline: Sept. 20)
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Ten (10) race registrations
- Logo on website

#### GOLD SPONSOR — \$2,000

- Company logo on back of participant shirt (Deadline: Sept 20)
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Eight (8) race registrations

#### SILVER SPONSOR — \$ 1,000

- Name listed on back of participant shirt (Deadline: Sept 20)
- Table and two chairs provided at display area on day of event
- Recognition on promotions within social media, press releases and more
- Recognition at podium on day of event
- Opportunity to advertise in registration packets (provided by Oct. 8)
- Five (5) race registrations

# CalvertHealth Breast Cancer RUN/WALK

## SPONSORSHIP | REGISTRATION



### REGISTRATION

- Early Bird Race Fee \$40  
(Before Oct. 8, 2025)
- Race Day Fee \$50

### SPONSORSHIP OPPORTUNITIES

<b>Title Sponsor</b>	\$15,000
<b>Corporate Sponsor</b>	\$10,000
<b>Pink Diamond Sponsor</b>	\$5,000
<b>Platinum Sponsor</b>	\$3,000
<b>Gold Sponsor</b>	\$2,000
<b>Silver Sponsor</b>	\$1,000

FULL NAME (Please Print) \_\_\_\_\_

TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

**Please make checks payable to:** CalvertHealth Foundation, Inc. My check for \$\_\_\_\_\_ is enclosed.

CalvertHealth Foundation accepts the following credit cards:

Visa  MasterCard  American Express  Discover AMOUNT TOTAL \$ \_\_\_\_\_

Card number \_\_\_\_\_ Security Code # \_\_\_\_\_

Name as it appears on your card (please print) \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Please mail completed form to:** CalvertHealth Foundation, PO Box 2127, Prince Frederick, MD 20678

**For additional information,** visit [www.calverthealthfoundation.org/CH-5K-Run-Walk](http://www.calverthealthfoundation.org/CH-5K-Run-Walk) or call 410.414.4570.