**2022 DSF Steps Toward A Cure**

**National Sponsorship Opportunities**

Dravet Syndrome Foundation’s *Steps Toward A Cure* consists of family-friendly events, walks and/or 5K races hosted by families throughout the US. This year, we will continue with our Dravet Superhero theme!

By becoming a National Walk Sponsor, you can make a significant contribution to the Dravet community and play a central role in the continued success of DSF. As a sponsor, your business or organization will benefit from visibility and goodwill to walk participants across the country.

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<th><strong>GOLD</strong> (PREMIER LEVEL)</th>
<th><strong>SILVER</strong></th>
<th><strong>BRONZE</strong></th>
<th><strong>PATRON</strong></th>
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<td>Signage at all 2022 walk locations</td>
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<td>Signage at all 2022 walk locations</td>
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<td>Logo on event t-shirt</td>
<td>5 admissions to any walk event</td>
<td>2 admissions to any walk event</td>
<td>Logo on event t-shirt</td>
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<td>10 admissions to any walk event</td>
<td>Sponsor table at any or all events</td>
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**DRAVET SYNDROME FOUNDATION’S MISSION:**

Our mission is to aggressively raise research funds for Dravet syndrome and related epilepsies; to increase awareness of these catastrophic conditions; and to provide support to affected individuals and families.

DSF provides support, education and advocacy for families and professionals dealing with the complex issues of this condition. DSF advances research to improve the quality of life for those living with Dravet syndrome. Since our inception in 2009, we have awarded over $5.6M in research grants and over $196K in patient assistance grants. www.dravetfoundation.org
2022 DSF National Walk Sponsorship Agreement Form

Please specify your sponsorship level:

☐ Gold ($7,500) ☐ Silver ($5,000) ☐ Bronze ($2,500) ☐ Patron ($1,000)

Company Information:

List this information exactly as it should appear on all conference materials. Please print clearly to ensure that published information is correct.

Name ____________________________________________________________

Title ______________________________________________________________

Company __________________________________________________________

Address __________________________________________________________

Telephone ___________________________ Fax ____________________________

Email _____________________________________________________________

Company Website __________________________________________________

Payment Method:

☐ Check/Money order enclosed payable to Dravet Syndrome Foundation.

Credit Card: ☐ MasterCard ☐ Visa ☐ American Express ☐ Discover

Total Amount ________________________________

Card # ________________________________

Exp. Date _______ /_________ (mm/yy) CVN # __________________________

Signature___________________________________________________________

Date ______________________________________________________________

Email completed agreements & hi –resolution logo image to misty@dravetfoundation.org.

Questions?
Contact Misty
203-392-1950
misty@dravetfoundation.org

Dravet Syndrome Foundation
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Cherry Hill, NJ  08034
www.dravetfoundation.org