

5Cities Homeless Coalition Presents

empty BOWLS



Thursday
October 1st 2026

11am to 1pm

St. Patrick's Catholic Church

501 Fair Oaks • Arroyo Grande

• HANDCRAFTED BOWLS •
SOUP • RAFFLE • FUN!

ALL PROCEEDS BENEFIT
5CITIES HOMELESS COALITION

Sponsor Today!

Alistair Chong

 (805) 550-8701

 alistair.chong@5chc.org

 www.5CHC.org

 P.O. Box 558

Grover Beach, CA 93433

Fair Market Value equals \$25 x number
of event day tickets at sponsor level.

We want to feature you!

In order to include your logo in
event materials, please email to:
alistair.chong@5chc.org

No later than October 1st.

2026 SPONSORSHIP OPPORTUNITIES

Five Star Level - \$5,000

- Largest logo on event program
- Largest logo on website
- Largest logo on all publicity materials
- Largest logo prominently displayed at event
- Acknowledgement in all event press releases
- 10 event day tickets

Four Star Level - \$2,500

- Mention in all event press releases
- Logo on all event publicity materials
- Logo on event program
- Logo prominently displayed at event
- Logo recognition on website
- 8 event day tickets

Three Star Level - \$1,000

- Logo or name on event publicity materials
- Logo or name on event program
- Logo or name displayed at event
- Logo recognition on website
- 6 event day tickets

Two Star Level - \$500

- Logo or name on event program
- Logo or name displayed at event
- Website recognition
- 4 event day tickets

One Star Level - \$250

- Name on event program
- Name displayed at event Website recognition
- 2 event day tickets

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Complete Form and Email or Mail to:

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No later than September 17th.

2026 SPONSORSHIP AVAILABLE NOW!

- Five Star Level \$5,000
- Four Star Level \$2,500
- Three Star Level \$1,000
- Two Star Level \$500
- One Star Level \$250



Business Name _____

Contact _____

Address _____

City/State/Zip _____

Telephone _____

Email _____

Enclosed please find a check in the amount of \$ _____

A check is being sent in the amount of \$ _____

Please charge my credit card in the amount of _____

Card # _____

Card Billing

Address Zip Code _____

Expiration Date _____

CVV Code _____