



THE POWER OF GIVING: THE KADENS FAMILY HEALTH & WELLNESS CAMPAIGN

Name _____ Class of _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Name for donor recognition _____ Anonymous

I wish to support the Ottawa Hills Schools Foundation with a total gift of \$ _____

My total donation is enclosed (Please make checks payable to Ottawa Hills Schools Foundation)

I would like to make payments over: 1 year 2 years 3 years, beginning mo/yr _____ My first payment is enclosed.

My employer will match my gift.

I am making a gift to: The Kadens Family Health & Wellness Campaign Other

Please contact me with information about other giving options (stocks, assets, etc.).

My gift is in honor memory of _____

Please check payment option:

VISA Name (as it appears on card) _____

MASTERCARD Billing address _____ City _____ State _____ Zip _____

DISCOVER Card number _____ Exp. month/year _____ CVV code _____

AMEX Cardholder signature _____ Date _____

Erica (Gatchel) Silk ('89) • Director of Development & Alumni Relations • 419.214.4838
Ottawa Hills Schools Foundation c/o Ottawa Hills Local Schools • 3600 Indian Road • Ottawa Hills, OH 43606

*NOTE: Gifts to Ottawa Hills Schools Foundation are deductible to the full extent of federal and state tax laws.

Naming Opportunities

Health and Wellness Sponsor <i>General interior with prominent signage</i>	\$250,000
Multipurpose Room Sponsor	\$250,000
Strength and Conditioning Sponsor <i>Free weight and cardio area</i>	\$100,000
Mind, Body, and Spirit Sponsor <i>Floor exercise and yoga area</i>	\$100,000
Women's Locker Room Sponsor	\$100,000
Men's Locker Room Sponsor	\$100,000
Athletic Training Room Sponsor	\$50,000
Fitness Office Sponsor	\$25,000

- Pledges to this campaign can be made over three years.
- Donor naming will be in place for a 20-year period.
- All donors of \$1,000 or more will be acknowledged on a donor recognition wall.